

BULKY DOCUMENTS

(Exceeds 300 pages)

Proceeding/Serial No: 91182488

Filed: 9-9-09

**Title: Endo Pharmaceuticals Inc. V. Interventional
Spine Inc.**

Part 1 of 2



TTAB

BRUCE A. McDONALD
PARTNER
(202) 419-4235

September 8, 2009

Trademark Trial and Appeal Board
U.S. Patent and Trademark Office
P.O. Box 1451
Alexandria, VA 22312-1451

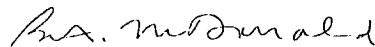
#77070442

Re: *Endo Pharmaceuticals Inc. v. Interventional Spine, Inc.*, Opposition No.
91182488 (Our Ref. 0222552.0052)

Dear Sir or Madam:

Enclosed for filing in this matter please find the Attachments to the Declaration of Guy Donatiello. The Declaration of Mr. Donatiello has been electronically filed as Exhibit A to Opposer's Motion for Summary Judgment.

Sincerely,



Bruce A. McDonald

BAM:me
Attachments

cc: Endo Pharmaceuticals Inc. (w/o att.)
Steven Nataupsky, Esq. (w/att.)

09-09-2009

U.S. Patent & Trademark Office

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
BEFORE THE TRADEMARK TRIAL AND APPEAL BOARD**

In the matter of Application Serial No. 77/070,442: PERCUDYN
Published in the *Official Gazette* of January 15, 2008, in International Class 10

Endo Pharmaceuticals Inc.,)	
)	
Opposer,)	Opposition No. 91182488
)	
v.)	Application Serial No. 77/070,442
)	
Interventional Spine, Inc.,)	
)	
Applicant.)	
)	

ATTACHMENTS TO DECLARATION OF GUY DONATIELLO

The following attachments accompany the Declaration of Guy Donatiello, submitted as Exhibit A to Opposer's Motion for Summary Judgment, filed September 8, 2009.

Attachment	Description
1	Percodan® , U.S. Trademark Registration No. 507,983, registered March 22, 1949
2	Percocet® , U.S. Trademark Registration No. 1,051,682, registered November 2, 1976
3	Percodan® Product Information from PDF at website
4	Recent Press Releases
5	Index of 340+ Newspaper Articles From 1959 – 2005 Appearing Principally in the Los Angeles Times, Washington Post, Chicago Tribune, and Wall Street Journal
6	Internet References to Percodan® Downloaded April 12, 2009
7	New York Times article referring to Percodan® as a "famous narcotic"
8	New York Times article describing Percocet® as "one of the most popular prescription painkillers in the world"
9	Sample of Recently Issued Trademark Registrations Covering Both Pharmaceuticals and Medical Devices
10	Sample of U.S. Trademark Registrations Owned by PhRMA Member Johnson & Johnson in International Classes 5 and 10
11	Sample of U.S. Trademark Registrations Owned by PhRMA Member Bayer HealthCare LLC and Affiliates

Attachment	Description
12	Sample of U.S. Trademark Registrations Owned by PhRMA Member Abbott Laboratories and Affiliates
13	Sample of U.S. Trademark Registrations Owned by PhRMA Member Genzyme Corporation and Affiliates
14	U.S. Trademark Registrations Covering Analgesic Products in Both International Class 5 and Medical Equipment and Devices, in International Class 10

Respectfully submitted,

ENDO PHARMACEUTICALS INC.

Bruce A. McDonald

by: _____

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September 8, 2009

CERTIFICATE OF SERVICE

The undersigned hereby certifies that on September 8, 2009, a copy of the foregoing Attachments to the Declaration of Guy Donatiello were sent by United States mail first class prepaid, on the following counsel of record for the Applicant:

Steven J. Nataupsky, Esq.
KNOBBE MARTENS OLSON & BEAR LLP
2040 Main Street, 14th Fl.
Irvine, CA 92614
E-mail: snataupsky@kmob.com

Bruce A. McDonald

Bruce A. McDonald
Attorney
SCHNADER HARRISON SEGAL & LEWIS LLP

Attachment 1

Int. Cl.: 5

Prior U.S. Cl.: 18

United States Patent and Trademark Office

Renewal

Reg. No. 507,983

Registered Mar. 22, 1949

OG Date July 4, 1989

**TRADEMARK
PRINCIPAL REGISTER**

PERCODAN

DU PONT PHARMACEUTICALS
CARIBE, INC. (DELAWARE CORPO-
RATION)

P.O. BOX 12

HIGHWAY 68, KM.2.3.

MANATI, PUERTO RICO 00701, ASSIGN-
EE BY MESNE ASSIGNMENT AND
CHANGE OF NAME FROM ENDO
PRODUCTS INC. (NEW YORK CORPO-
RATION) RICHMOND HILL, NY

FOR: GENERAL ANALGESIC, IN
CLASS 18 (INT. CL. 5).

FIRST USE 1-15-1948; IN COMMERCE
1-15-1948.

SER. NO. 553,092, FILED 3-26-1948.

*In testimony whereof I have hereunto set my hand
and caused the seal of The Patent and Trademark
Office to be affixed on July 4, 1989.*

COMMISSIONER OF PATENTS AND TRADEMARKS

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-04 21:50:14 ET

Serial Number: 71553092 Assignment Information Trademark Document Retrieval

Registration Number: 507983

Mark (words only): PERCODAN

Standard Character claim: No

Current Status: This registration has been renewed.

Date of Status: 2008-04-17

Filing Date: 1948-03-26

Transformed into a National Application: No

Registration Date: 1949-03-22

Register: Principal

Law Office Assigned: (NOT AVAILABLE)

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 40S -Scanning On Demand

Date In Location: 2009-01-26

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. ENDO PHARMACEUTICALS INC.

Address:

ENDO PHARMACEUTICALS INC.
100 Endo Blvd.
Chadds Ford, PA 19317
United States

Legal Entity Type: Corporation

State or Country of Incorporation: Delaware

GOODS AND/OR SERVICES

U.S. Class: 018 (International Class 005)

Class Status: Active

GENERAL ANALGESIC

Basis: 1(a)

First Use Date: 1948-01-15

First Use in Commerce Date: 1948-01-15

ADDITIONAL INFORMATION

(NOT AVAILABLE)

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2009-01-26 - Case File In TICRS

2008-04-17 - Third renewal 10 year

2008-04-17 - Section 8 (10-year) accepted/ Section 9 granted

2008-04-08 - Assigned To Paralegal

2008-03-31 - TEAS Section 8 & 9 Received

2008-03-31 - Applicant Correspondence Changes (Non-Responsive) Entered

2008-03-31 - TEAS Change Of Owner Address Received

2002-08-15 - Section 15 acknowledged

2002-05-30 - Section 15 affidavit received

1989-03-22 - Second renewal

1989-02-27 - Section 9 filed check record for Section 8

1969-03-22 - First renewal

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

JAMES R. MEYER

Correspondent

JAMES R. MEYER
SCHNADER HARRISON SEGAL & LEWIS LLP
SUITE 3600
1600 MARKET STREET
PHILADELPHIA PA 19103-7286
Phone Number: 215-751-2622
Fax Number: 215-972-7677

Attachment 2

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-04 21:53:16 ET

Serial Number: 73072165 Assignment Information Trademark Document Retrieval

Registration Number: 1051682

Mark (words only): PERCOCET

Standard Character claim: No

Current Status: This registration has been renewed.

Date of Status: 2006-02-27

Filing Date: 1975-12-18

Transformed into a National Application: No

Registration Date: 1976-11-02

Register: Principal

Law Office Assigned: (NOT AVAILABLE)

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 40S -Scanning On Demand

Date In Location: 2007-11-05

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. ENDO PHARMACEUTICALS INC.

Address:

ENDO PHARMACEUTICALS INC.
100 ENDO BLVD.
CHADDS FORD, PA 19317
United States

Legal Entity Type: Corporation

State or Country of Incorporation: Delaware

GOODS AND/OR SERVICES

International Class: 005

Class Status: Active

PHARMACEUTICAL ANALGESIC PREPARATIONS

Basis: 1(a)

First Use Date: 1975-12-15

First Use in Commerce Date: 1975-12-15

ADDITIONAL INFORMATION

Prior Registration Number(s):

507983

953474

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2007-11-05 - Case File In TICRS

2006-02-27 - Second renewal 10 year

2006-02-27 - Section 8 (10-year) accepted/ Section 9 granted

2006-02-21 - Assigned To Paralegal

2005-12-09 - Combined Section 8 (10-year)/Section 9 filed

2005-12-09 - PAPER RECEIVED

2005-03-17 - TEAS Change Of Correspondence Received

1996-11-25 - First renewal 10 year

1996-10-25 - Section 9 filed check record for Section 8

1982-06-02 - Section 8 (6-year) accepted & Section 15 acknowledged

ATTORNEY/CORRESPONDENT INFORMATION

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Correspondent

JAMES R MEYER

SCHNADER HARRISON SEGAL & LEWIS LLP

INTELLECTUAL PROPERTY DEPT. - TRADEMARKS
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PHILADELPHIA PA 19103
Phone Number: 215-751-2622
Fax Number: 215-972-7677

Attachment 3

Endo Pharmaceuticals

- Home
- Contact Us
- Email Alerts

Explore our broad portfolio of branded and generic products

This product information is intended for U.S. residents only. You should not construe anything on this site as a promotion or solicitation for any product or for the use of any product outside the United States.

View the certifications for Endo products sold in child-resistant packaging as required by the Consumer Product Safety Improvement Act 2008(CPSIA).

Endocrinology

SUPPRELIN[®] LA (histrelin acetate) subcutaneous implant

[View Full Prescribing Information](#)

DELATESTRYL[®] (Testosterone Enanthate Injection) CIII

[View Full Prescribing Information](#)

Pain Management Products

FROVA[®] (frovatriptan succinate) Tablets

[View Full Prescribing Information](#)

LIDODERM[®] (Lidocaine Patch 5%)

[View Full Prescribing Information](#)

OPANA[®] (oxymorphone hydrochloride) Tablets CII

[View Full Prescribing Information](#)

OPANA[®] ER (oxymorphone hydrochloride) Extended-Release Tablets CII

[View Full Prescribing Information](#)

PERCOET[®] (oxycodone hydrochloride and acetaminophen, USP) Tablets CII

[View Full Prescribing Information](#)

PERCODAN[®] (oxycodone hydrochloride and aspirin, USP) Tablets CII

[View Full Prescribing Information](#)

VOLTAREN[®] Gel (diclofenac sodium topical gel) 1%

[View Full Prescribing Information](#)

Oncology

VALSTAR[™] (valrubicin) Sterile Solution for Intravesical Instillation (Not Currently Available)

[View Full Prescribing Information](#)

VANTAS[®] (histrelin implant)

[View Full Prescribing Information](#)

Urology

SANCTURA[®] (trospium chloride)

[View Full Prescribing Information](#)



PERCODAN®
(Oxycodone and Aspirin Tablets, USP)

CII

Rx only

DESCRIPTION

Each PERCODAN Tablet contains:

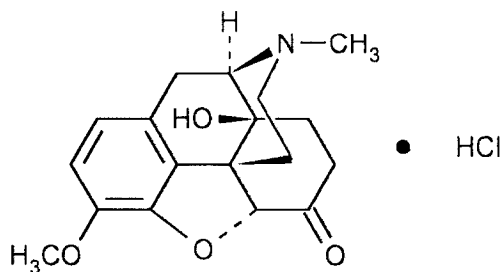
Oxycodone Hydrochloride, USP 4.8355 mg*

Aspirin, USP 325 mg

*4.8355 mg oxycodone HCl is equivalent to 4.3346 mg of oxycodone as the free base.

PERCODAN Tablets also contain the following inactive ingredients: D&C Yellow 10, FD&C Yellow 6, microcrystalline cellulose and corn starch.

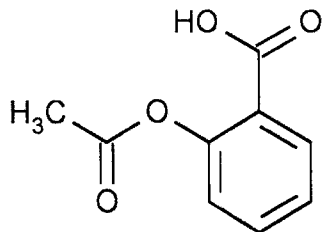
The oxycodone hydrochloride component is Morphinan-6-one, 4,5-epoxy-14-hydroxy-3-methoxy-17-methyl-, hydrochloride, (5a)-, a white to off-white, hygroscopic crystals or powder, odorless, soluble in water; slightly soluble in alcohol and is represented by the following structural formula:



$C_{18}H_{21}NO_4 \cdot HCl$

MW 351.82

The aspirin component is 2-(acetyloxy)-, Benzoic acid, a white crystal, commonly tabular or needle-like, or white, crystalline powder. Is odorless or has a faint odor. Is stable in dry air; in moist air it gradually hydrolyzes to salicylic and acetic acids. Slightly soluble in water; freely soluble in alcohol; soluble in chloroform and in ether; sparingly soluble in absolute ether and is represented by the following structural formula:



$C_9H_8O_4$ MW 180.16

CLINICAL PHARMACOLOGY

Central Nervous System

Oxycodone is a semisynthetic pure opioid agonist whose principal therapeutic action is analgesia. Other pharmacological effects of oxycodone include anxiolysis, euphoria and feelings of relaxation. These effects are mediated by receptors (notably μ and κ) in the central nervous system for endogenous opioid-like compounds such as endorphins and enkephalins. Oxycodone produces respiratory depression through direct activity at respiratory centers in the brain stem and depresses the cough reflex by direct effect on the center of the medulla.

Aspirin (acetylsalicylic acid) works by inhibiting the body's production of prostaglandins, including prostaglandins involved in inflammation. Prostaglandins cause pain sensations by stimulating muscle contractions and dilating blood vessels throughout the body. In the CNS, aspirin works on the hypothalamus heat-regulating center to reduce fever, however, other mechanisms may be involved.

Gastrointestinal Tract and Other Smooth Muscle

Oxycodone reduces motility by increasing smooth muscle tone in the stomach and duodenum. In the small intestine, digestion of food is delayed by decreases in propulsive contractions. Other opioid effects include contraction of biliary tract smooth muscle, spasm of the Sphincter of Oddi, increased ureteral and bladder sphincter tone, and a reduction in uterine tone.

Aspirin can produce gastrointestinal injury (lesions, ulcers) through a mechanism that is not yet completely understood, but may involve a reduction in eicosanoid synthesis by the gastric mucosa. Decreased production of prostaglandins may compromise the defenses of the gastric mucosa and the activity of substances involved in tissue repair and ulcer healing.

Cardiovascular System

Oxycodone may produce a release of histamine and may be associated with orthostatic hypotension, and other symptoms, such as pruritus, flushing, red eyes, and sweating.

Platelet Aggregation

Aspirin affects platelet aggregation by irreversibly inhibiting prostaglandin cyclo-oxygenase. This effect lasts for the life of the platelet and prevents the formation of the platelet aggregating

factor thromboxane A₂. Nonacetylated salicylates do not inhibit this enzyme and have no effect on platelet aggregation. At somewhat higher doses, aspirin reversibly inhibits the formation of prostaglandin 12 (prostacyclin), which is an arterial vasodilator and inhibits platelet aggregation.

Pharmacokinetics

Absorption and Distribution

The mean absolute oral bioavailability of oxycodone in cancer patients was reported to be about 87%. Oxycodone has been shown to be 45% bound to human plasma proteins *in vitro*. The volume of distribution after intravenous administration is 211.9 ± 186.6 L.

Aspirin is hydrolyzed primarily to salicylic acid in the gut wall and during first-pass metabolism through the liver. Salicylic acid is absorbed rapidly from the stomach, but most of the absorption occurs in the proximal small intestine. Following absorption, salicylate is distributed to most body tissues and fluids, including fetal tissues, breast milk, and the CNS. High concentrations are found in the liver and kidneys. Salicylate is variably bound to serum proteins, particularly albumin.

Metabolism and Elimination

A high portion of oxycodone is N-dealkylated to noroxycodone during first-pass metabolism. Oxymorphone, is formed by the O-demethylation of oxycodone. The metabolism of oxycodone to oxymorphone is catalyzed by CYP2D6. Free and conjugated noroxycodone, free and conjugated oxycodone, and oxymorphone are excreted in human urine following a single oral dose of oxycodone. Approximately 8% to 14% of the dose is excreted as free oxycodone over 24 hours after administration. Following a single, oral dose of oxycodone, the mean \pm SD elimination half-life is 3.51 ± 1.43 hours.

The biotransformation of aspirin occurs primarily in the liver by the microsomal enzyme system. With a plasma half-life of approximately 15 minutes, aspirin is rapidly hydrolyzed to salicylate. At low doses, salicylate elimination follows first-order kinetics. The plasma half-life of salicylate is approximately 2 to 3 hours.

Approximately 10% of aspirin is excreted as unchanged salicylate in the urine. The major metabolites excreted in the urine are salicylic acid (75%), salicyl phenolic glucuronide (10%), salicyl acyl glucuronide (5%), and gentisic and gentisuric acid (less than 1%) each. Eighty to 100% of a single dose is excreted in the urine within 24 to 72 hours.

INDICATIONS AND USAGE

PERCODAN tablets are indicated for the management of moderate to moderately severe pain.

CONTRAINDICATIONS

PERCODAN tablets are contraindicated in patients with known hypersensitivity to oxycodone or aspirin, and in any situation where opioids or aspirin are contraindicated. Aspirin is contraindicated for patients with hemophilia.

Reye Syndrome: Aspirin should not be used in children or teenagers for viral infections, with or without fever, because of the risk of Reye syndrome with concomitant use of aspirin in certain viral illnesses.

Allergy: Aspirin is contraindicated in patients with known allergy to nonsteroidal anti-inflammatory drug products and in patients with the syndrome of asthma, rhinitis, and nasal polyps. Aspirin may cause severe urticaria, angioedema, or bronchospasm (asthma).

Oxycodone is contraindicated in patients with known hypersensitivity to oxycodone. Oxycodone is contraindicated in any situation where opioids are contraindicated including patients with significant respiratory depression (in unmonitored settings or the absence of resuscitative equipment) and patients with acute or severe bronchial asthma or hypercarbia. Oxycodone is contraindicated in the setting of suspected or known paralytic ileus.

WARNINGS

Misuse, Abuse and Diversion of Opioids

Oxycodone is an opioid agonist of the morphine-type. Such drugs are sought by drug abusers and people with addiction disorders and are subject to criminal diversion.

Oxycodone can be abused in a manner similar to other opioid agonists, legal or illicit. This should be considered when prescribing or dispensing PERCODAN tablets in situations where the physician or pharmacist is concerned about an increased risk of misuse, abuse, or diversion. Concerns about misuse, addiction, and diversion should not prevent the proper management of pain.

Healthcare professionals should contact their State Professional Licensing Board, or State Controlled Substances Authority for information on how to prevent and detect abuse or diversion of this product.

Administration of PERCODAN (Oxycodone and Aspirin Tablets, USP) tablets should be closely monitored for the following potentially serious adverse reactions and complications:

Respiratory Depression

Respiratory depression is a hazard with the use of oxycodone, one of the active ingredients in PERCODAN tablets, as with all opioid agonists. Elderly and debilitated patients are at particular risk for respiratory depression as are non-tolerant patients given large initial doses of oxycodone or when oxycodone is given in conjunction with other agents that depress respiration. Oxycodone should be used with extreme caution in patients with acute asthma, chronic obstructive pulmonary disorder (COPD), cor pulmonale, or preexisting respiratory impairment. In such patients, even usual therapeutic doses of oxycodone may decrease respiratory drive to the point of apnea. In these patients alternative non-opioid analgesics should be considered, and opioids should be employed only under careful medical supervision at the lowest effective dose.

In case of respiratory depression, a reversal agent such as naloxone hydrochloride may be utilized (see OVERDOSAGE).

Head Injury and Increased Intracranial Pressure

The respiratory depressant effects of opioids include carbon dioxide retention and secondary elevation of cerebrospinal fluid pressure, and may be markedly exaggerated in the presence of head injury, other intracranial lesions or a pre-existing increase in intracranial pressure.

Oxycodone produces effects on pupillary response and consciousness which may obscure neurologic signs of worsening in patients with head injuries.

Hypotensive Effect

Oxycodone may cause severe hypotension particularly in individuals whose ability to maintain blood pressure has been compromised by a depleted blood volume, or after concurrent administration with drugs which compromise vasomotor tone such as phenothiazines.

Oxycodone, like all opioid analgesics of the morphine-type, should be administered with caution to patients in circulatory shock, since vasodilation produced by the drug may further reduce cardiac output and blood pressure. Oxycodone may produce orthostatic hypotension in ambulatory patients.

Alcohol Warning

Patients who consume three or more alcoholic drinks every day should be counseled about the bleeding risks involved with chronic, heavy alcohol use while taking aspirin.

Coagulation Abnormalities

Even low doses of aspirin can inhibit platelet function leading to an increase in bleeding time. This can adversely affect patients with inherited (hemophilia) or acquired (liver disease or vitamin K deficiency) bleeding disorders.

GI Side Effects

GI side effects include stomach pain, heartburn, nausea, vomiting, and gross GI bleeding. Although minor upper GI symptoms, such as dyspepsia, are common and can occur anytime during therapy, physicians should remain alert for signs of ulceration and bleeding, even in the absence of previous GI symptoms. Physicians should inform patients about the signs and symptoms of GI side effects and what steps to take if they occur.

Peptic Ulcer Disease

Patients with a history of active peptic ulcer disease should avoid using aspirin, which can cause gastric mucosal irritation and bleeding.

PRECAUTIONS

General

Opioid analgesics should be used with caution when combined with CNS depressant drugs, and should be reserved for cases where the benefits of opioid analgesia outweigh the known risks of respiratory depression, altered mental state, and postural hypotension.

PERCODAN tablets should be given with caution to patients with CNS depression, elderly or debilitated patients, patients with severe impairment of hepatic, pulmonary, or renal function,

hypothyroidism, Addison's disease, prostatic hypertrophy, urethral stricture, acute alcoholism, delirium tremens, kyphoscoliosis with respiratory depression, myxedema, and toxic psychosis.

PERCODAN tablets may obscure the diagnosis or clinical course in patients with acute abdominal conditions. Oxycodone may aggravate convulsions in patients with convulsive disorders, and all opioids may induce or aggravate seizures in some clinical settings.

Following administration of PERCODAN tablets, anaphylactic reactions have been reported in patients with a known hypersensitivity to codeine, a compound with a structure similar to morphine and oxycodone. The frequency of this possible cross-sensitivity is unknown.

Aspirin has been associated with elevated hepatic enzymes, blood urea nitrogen and serum creatinine, hyperkalemia, proteinuria, and prolonged bleeding time.

Hemorrhage

Aspirin may increase the likelihood of hemorrhage due to its effect on the gastric mucosa and platelet function (prolongation of bleeding time). Salicylates should be used with caution in the presence of peptic ulcer or coagulation abnormalities.

Pregnancy

Aspirin can cause fetal harm when administered to a pregnant woman. Salicylates readily cross the placenta and by inhibiting prostaglandin synthesis, may cause constriction of ductus arteriosus, resulting in pulmonary hypertension and increased fetal mortality and, possibly other untoward fetal effects. Aspirin use in pregnancy can also result in alteration in maternal and neonatal hemostasis mechanisms. Maternal aspirin use during later stages of pregnancy may cause low birth weight, increased incidence of intracranial hemorrhage in premature infants, stillbirths and neonatal death. The use of aspirin during pregnancy especially in the third trimester should be avoided. If PERCODAN tablets are used during pregnancy, or if the patient becomes pregnant while taking this drug, the patient should be apprised of the potential hazard to the fetus.

Renal Failure

Avoid aspirin in patients with severe renal failure (glomerular filtration rate less than 10 mL/minute).

Hepatic Insufficiency

Avoid aspirin in patients with severe hepatic insufficiency.

Interactions with Other CNS Depressants

Patients receiving other opioid analgesics, general anesthetics, phenothiazines, other tranquilizers, centrally-acting anti-emetics, sedative-hypnotics or other CNS depressants (including alcohol) concomitantly with PERCODAN tablets may exhibit an additive CNS depression. When such combined therapy is contemplated, the dose of one or both agents should be reduced.

Interactions with Mixed Agonist/Antagonist Opioid Analgesics

Agonist/antagonist analgesics (i.e., pentazocine, nalbuphine, and butorphanol) should be administered with caution to a patient who has received or is receiving a course of therapy with a pure opioid agonist analgesic such as oxycodone. In this situation, mixed agonist/antagonist analgesics may reduce the analgesic effect of oxycodone and/or may precipitate withdrawal symptoms in these patients.

Ambulatory Surgery and Postoperative Use

Oxycodone and other morphine-like opioids have been shown to decrease bowel motility. Ileus is a common postoperative complication, especially after intra-abdominal surgery with use of opioid analgesia. Caution should be taken to monitor for decreased bowel motility in postoperative patients receiving opioids. Standard supportive therapy should be implemented.

Use in Pancreatic/Biliary Tract Disease

Oxycodone may cause spasm of the sphincter of Oddi and should be used with caution in patients with biliary tract disease, including acute pancreatitis. Opioids like oxycodone may cause increases in the serum amylase level.

Tolerance and Physical Dependence

Tolerance is the need for increasing doses of opioids to maintain a defined effect such as analgesia (in the absence of disease progression or other external factors). Physical dependence is manifested by withdrawal symptoms after abrupt discontinuation of a drug or upon administration of an antagonist. Physical dependence and tolerance are not unusual during chronic opioid therapy.

The opioid abstinence or withdrawal syndrome is characterized by some or all of the following: restlessness, lacrimation, rhinorrhea, yawning, perspiration, chills, myalgia, and mydriasis. Other symptoms also may develop, including: irritability, anxiety, backache, joint pain, weakness, abdominal cramps, insomnia, nausea, anorexia, vomiting, diarrhea, or increased blood pressure, respiratory rate, or heart rate.

In general, opioids should not be abruptly discontinued (see DOSAGE AND ADMINISTRATION: Cessation of Therapy).

Information for Patients/Caregivers

The following information should be provided to patients receiving PERCODAN tablets by their physician, nurse, pharmacist, or caregiver:

1. Patients should be aware that PERCODAN tablets contain oxycodone, which is a morphine-like substance.
2. Patients should be instructed to keep PERCODAN tablets in a secure place out of the reach of children. In the case of accidental ingestions, emergency medical care should be sought immediately.
3. When PERCODAN tablets are no longer needed, the unused tablets should be destroyed by flushing down the toilet.

4. Patients should be advised not to adjust the medication dose themselves. Instead, they must consult with their prescribing physician.
5. Patients should be advised that PERCODAN tablets may impair mental and/or physical ability required for the performance of potentially hazardous tasks (e.g., driving, operating heavy machinery).
6. Patients should not combine PERCODAN tablets with alcohol, opioid analgesics, tranquilizers, sedatives, or other CNS depressants unless under the recommendation and guidance of a physician. When co-administered with another CNS depressant, PERCODAN tablets can cause dangerous additive central nervous system or respiratory depression, which can result in serious injury or death.
7. The safe use of PERCODAN tablets during pregnancy has not been established; thus, women who are planning to become pregnant or are pregnant should consult with their physician before taking PERCODAN tablets.
8. Nursing mothers should consult with their physicians about whether to discontinue nursing or discontinue PERCODAN tablets because of the potential for serious adverse reactions to nursing infants.
9. Patients who are treated with PERCODAN tablets for more than a few weeks should be advised not to abruptly discontinue the medication. Patients should consult with their physician for a gradual discontinuation dose schedule to taper off the medication.
10. Patients should be advised that PERCODAN tablets are a potential drug of abuse. They should protect it from theft, and it should never be given to anyone other than the individual for whom it was prescribed.

Laboratory Tests

Although oxycodone may cross-react with some drug urine tests, no available studies were found which determined the duration of detectability of oxycodone in urine drug screens. However, based on pharmacokinetic data, the approximate duration of detectability for a single dose of oxycodone is roughly estimated to be one to two days following drug exposure.

Urine testing for opiates may be performed to determine illicit drug use and for medical reasons such as evaluation of patients with altered states of consciousness or monitoring efficacy of drug rehabilitation efforts. The preliminary identification of opiates in urine involves the use of an immunoassay screening and thin-layer chromatography (TLC). Gas chromatography/mass spectrometry (GC/MS) may be utilized as a third-stage identification step in the medical investigational sequence for opiate testing after immunoassay and TLC. The identities of 6-keto opiates (e.g., oxycodone) can further be differentiated by the analysis of their methoxime-trimethylsilyl (MO-TMS) derivative.

Drug/Drug Interactions with Oxycodone

Opioid analgesics may enhance the neuromuscular-blocking action of skeletal muscle relaxants and produce an increase in the degree of respiratory depression.

Patients receiving CNS depressants such as other opioid analgesics, general anesthetics, phenothiazines, other tranquilizers, centrally-acting anti-emetics, sedative-hypnotics or other CNS depressants (including alcohol) concomitantly with PERCODAN tablets may exhibit an

additive CNS depression. When such combined therapy is contemplated, the dose of one or both agents should be reduced.

Agonist/antagonist analgesics (i.e., pentazocine, nalbuphine, naltrexone, and butorphanol) should be administered with caution to a patient who has received or is receiving a pure opioid agonist such as oxycodone. These agonist/antagonist analgesics may reduce the analgesic effect of oxycodone or may precipitate withdrawal symptoms.

Drug/Drug Interactions with Aspirin

Angiotensin Converting Enzyme (ACE) Inhibitors: The hyponatremic and hypotensive effects of ACE inhibitors may be diminished by the concomitant administration of aspirin due to its indirect effect on the renin-angiotensin conversion pathway.

Acetazolamide: Concurrent use of aspirin and acetazolamide can lead to high serum concentrations of acetazolamide (and toxicity) due to competition at the renal tubule for secretion.

Anticoagulant Therapy (Heparin and Warfarin): Patients on anticoagulation therapy are at increased risk for bleeding because of drug-drug interactions and the effect on platelets. Aspirin can displace warfarin from protein binding sites, leading to prolongation of both the prothrombin time and the bleeding time. Aspirin can increase the anticoagulant activity of heparin, increasing bleeding risk.

Anticonvulsants: Salicylate can displace protein-bound phenytoin and valproic acid, leading to a decrease in the total concentration of phenytoin and an increase in serum valproic acid levels.

Beta Blockers: The hypotensive effects of beta blockers may be diminished by the concomitant administration of aspirin due to inhibition of renal prostaglandins, leading to decreased renal blood flow, and salt and fluid retention.

Diuretics: The effectiveness of diuretics in patients with underlying renal or cardiovascular disease may be diminished by the concomitant administration of aspirin due to inhibition of renal prostaglandins, leading to decreased renal blood flow and salt and fluid retention.

Methotrexate: Aspirin may enhance the serious side and toxicity of methotrexate due to displacement from its plasma protein binding sites and/or reduced renal clearance.

Nonsteroidal Anti-inflammatory Drugs (NSAID's): The concurrent use of aspirin with other NSAID's should be avoided because this may increase bleeding or lead to decreased renal function. Aspirin may enhance the serious side effects and toxicity of ketorolac, due to displacement from its plasma protein binding sites and/or reduced renal clearance.

Oral Hypoglycemics Agents: Aspirin may increase the serum glucose-lowering action of insulin and sulfonylureas leading to hypoglycemia.

Uricosuric Agents: Salicylates antagonize the uricosuric action of probenecid or sulfapyrazone.

Drug/Laboratory Test Interactions

Depending on the sensitivity/specificity and the test methodology, the individual components of PERCODAN tablets may cross-react with assays used in the preliminary detection of cocaine (primary urinary metabolite, benzoylecgonine) or marijuana (cannabinoids) in human urine. A more specific alternate chemical method must be used in order to obtain a confirmed analytical result. The preferred confirmatory method is gas chromatography/mass spectrometry (GC/MS). Moreover, clinical considerations and professional judgment should be applied to any drug-of-abuse test result, particularly when preliminary positive results are used.

Salicylates may increase the protein bound iodine (PBI) result by competing for the protein binding sites on pre-albumin and possibly thyroid-binding globulins.

Carcinogenesis, Mutagenesis, Impairment of Fertility

Carcinogenesis

Animal studies to evaluate the carcinogenic potential of oxycodone and aspirin have not been performed.

Mutagenesis

The combination of oxycodone and aspirin has not been evaluated for mutagenicity. Oxycodone alone was negative in a bacterial reverse mutation assay (Ames), an *in vitro* chromosome aberration assay with human lymphocytes without metabolic activation and an *in vivo* mouse micronucleus assay. Oxycodone was clastogenic in the human lymphocyte chromosomal assay in the presence of metabolic activation and in the mouse lymphoma assay with or without metabolic activation. Aspirin induced chromosome aberrations in cultured human fibroblasts.

Fertility

Animal studies to evaluate the effects of oxycodone on fertility have not been performed. Aspirin has been shown to inhibit ovulation in rats.

Pregnancy

Teratogenic Effects

Oxycodone: Pregnancy Category B

Reproduction studies in rats and rabbits demonstrated that oral administration of oxycodone was not teratogenic or embryo-fetal toxic.

Aspirin: Pregnancy Category D (see PRECAUTIONS)

Salicylates readily cross the placenta and by inhibiting prostaglandin synthesis, may cause constriction of ductus arteriosus resulting in pulmonary hypertension and increased fetal mortality and, possibly other untoward fetal effects. Aspirin use in pregnancy can also result in alteration in maternal and neonatal hemostasis mechanisms. Maternal aspirin use during later stages of pregnancy may cause low birth weight, increased incidence of intracranial hemorrhage in premature infants, stillbirths and neonatal death. Use during pregnancy, especially in the third trimester, should be avoided.

Safe use of PERCODAN (Oxycodone and Aspirin Tablets, USP) in pregnancy has not been established relative to possible adverse effects on fetal development. Therefore, PERCODAN tablets should not be used in pregnant women unless, in the judgment of the physician, the potential benefits outweigh the possible hazards.

Nonteratogenic Effects

Opioids can cross the placental barrier and have the potential to cause neonatal respiratory depression. Opioid use during pregnancy may result in a physically drug-dependent fetus. After birth, the neonate may suffer severe withdrawal symptoms. Aspirin may produce anemia, ante- or postpartum hemorrhage, prolonged gestation and labor, and oligohydramnios.

Labor and Delivery

PERCODAN tablets are not recommended for use in women during and immediately prior to labor and delivery due to its potential effects on respiratory function in the newborn. Aspirin should be avoided one week prior to and during labor and delivery because it can result in excessive blood loss at delivery. Prolonged gestation and prolonged labor due to prostaglandin inhibition have been reported.

Nursing Mothers

Ordinarily, nursing should not be undertaken while a patient is receiving PERCODAN tablets because of the possibility of sedation and/or respiratory depression in the infant. Oxycodone is excreted in breast milk in low concentrations, and there have been rare reports of somnolence and lethargy in babies of nursing mothers taking an oxycodone/acetaminophen product. Salicylic acid has also been detected in breast milk. Adverse effects on platelet function in the nursing infant exposed to aspirin in breast milk may be a potential risk. Furthermore, the risk of **Reye Syndrome** caused by salicylate in breast milk is unknown. Because of the potential for serious adverse reactions in nursing infants, a decision should be made whether to discontinue nursing or to discontinue the drug, taking into account the potential benefits to the woman and the possible hazards to the nursing infant.

Pediatric Use

PERCODAN tablets should not be administered to pediatric patients. Reye Syndrome is a rare but serious disease which can follow flu or chicken pox in children and teenagers. While the cause of Reye Syndrome is unknown, some reports claim aspirin (or salicylates) may increase the risk of developing this disease.

Geriatric Use

Special precaution should be given when determining the dosing amount and frequency of PERCODAN tablets for geriatric patients, since clearance of oxycodone may be slightly reduced in this patient population when compared to younger patients.

Hepatic Impairment

In a pharmacokinetic study of oxycodone in patients with end-stage liver disease, oxycodone plasma clearance decreased and the elimination half-life increased. Care should be exercised when oxycodone is used in patients with hepatic impairment.

Renal Impairment

In a study of patients with end stage renal impairment, mean elimination half-life was prolonged in uremic patients due to increased volume of distribution and reduced clearance. Oxycodone should be used with caution in patients with renal impairment.

ADVERSE REACTIONS

Serious adverse reactions that may be associated with PERCODAN tablet use include respiratory depression, apnea, respiratory arrest, circulatory depression, hypotension, and shock (see OVERDOSAGE).

The most frequently observed non-serious adverse reactions include lightheadedness, dizziness, drowsiness or sedation, nausea, and vomiting. These effects seem to be more prominent in ambulatory than in nonambulatory patients, and some of these adverse reactions may be alleviated if the patient lies down. Other adverse reactions include euphoria, dysphoria, constipation and pruritus.

Aspirin may increase the likelihood of hemorrhage due to its effect on the gastric mucosa and platelet function. Furthermore, aspirin has the potential to cause anaphylaxis in hypersensitive patients as well as angioedema especially in patients with chronic urticaria. Other adverse reactions due to aspirin use include anorexia, reversible hepatotoxicity, leukopenia, thrombocytopenia, purpura, decreased plasma iron concentration, and shortened erythrocyte survival time.

Other adverse reactions obtained from postmarketing experiences with PERCODAN tablets are listed by organ system and in decreasing order of severity and/or frequency as follows:

Body as a Whole

allergic reaction, malaise, asthenia, headache, anaphylaxis, fever, hypothermia, thirst, increased sweating, accident, accidental overdose, non-accidental overdose.

Cardiovascular

tachycardia, dysrhythmias, hypotension, orthostatic hypotension, bradycardia, palpitations

Central and Peripheral Nervous System

stupor, paresthesia, agitation, cerebral edema, coma, confusion, dizziness, headache, subdural or intracranial hemorrhage, lethargy, seizures, anxiety, mental impairment

Fluid and Electrolyte

dehydration, hyperkalemia, metabolic acidosis, respiratory alkalosis

Gastrointestinal

hemorrhagic gastric/duodenal ulcer, gastric/peptic ulcer, dyspepsia, abdominal pain, diarrhea, eructation, dry mouth, gastrointestinal bleeding, intestinal perforation, nausea, vomiting, transient elevations of hepatic enzymes, hepatitis, Reye syndrome, pancreatitis, intestinal obstruction, ileus

Hearing and Vestibular

hearing loss, tinnitus. Patients with high frequency loss may have difficulty perceiving tinnitus. In these patients, tinnitus cannot be used as a clinical indicator of salicylism.

Hematologic

unspecified hemorrhage, purpura, reticulocytosis, prolongation of prothrombin time, disseminated intravascular coagulation, ecchymosis, thrombocytopenia

Hypersensitivity

acute anaphylaxis, angioedema, asthma, bronchospasm, laryngeal edema, urticaria, anaphylactoid reaction

Metabolic and Nutritional

hypoglycemia, hyperglycemia, acidosis, alkalosis

Musculoskeletal

rhabdomyolysis

Ocular

miosis, visual disturbances, red eye

Psychiatric

drug dependence, drug abuse, somnolence, depression, nervousness, hallucination

Reproductive

prolonged pregnancy and labor, stillbirths, lower birth weight infants, antepartum and postpartum bleeding, closure of patent ductus arteriosus

Respiratory System

bronchospasm, dyspnea, hyperpnea, pulmonary edema, tachypnea, aspiration, hypoventilation, laryngeal edema

Skin and Appendages

urticaria, rash, flushing

Urogenital

interstitial nephritis, papillary necrosis, proteinuria, renal insufficiency and failure, urinary retention

OVERDOSAGE

Signs and Symptoms

Serious overdose with PERCODAN (Oxycodone and Aspirin Tablets, USP) is characterized by signs and symptoms of opioid and salicylate overdose. Oxycodone overdose can be manifested by respiratory depression (a decrease in respiratory rate and/or tidal volume, Cheyne-Stokes respiration, cyanosis), extreme somnolence progressing to stupor or coma, skeletal muscle

flaccidity, cold and clammy skin, pupillary constriction (pupils may be dilated in the setting of hypoxia), and sometimes bradycardia and hypotension. In severe overdose, apnea, circulatory collapse, cardiac arrest and death may occur. Early signs of acute aspirin (salicylate) overdose including tinnitus occur at plasma concentrations approaching 200 mcg/mL. Plasma concentrations of aspirin above 300 mcg/mL are toxic. Severe toxic effects are associated with levels above 400 mcg/mL. A single lethal dose of aspirin in adults is not known with certainty but death may be expected at 30 g. For real or suspected overdose, a Poison Control Center should be contacted immediately.

In acute salicylate overdose, severe acid-base and electrolyte disturbances may occur and are complicated by hyperthermia and dehydration, and coma. Respiratory alkalosis occurs early while hyperventilation is present, but is quickly followed by metabolic acidosis. Serious symptoms such as depression, coma, and respiratory failure progress rapidly.

Salicylism (chronic salicylate toxicity) may be noted by symptoms such as dizziness, tinnitus, difficulty hearing, nausea, vomiting, diarrhea, and mental confusion. More severe salicylism may result in respiratory alkalosis.

Treatment

Primary attention should be given to the reestablishment of adequate respiratory exchange through provision of a patent airway and the institution of assisted or controlled ventilation. Supportive measures (including oxygen, intravenous fluids, and vasopressors) should be employed in the management of circulatory shock and pulmonary edema accompanying overdose as indicated. Cardiac arrest or arrhythmias may require cardiac massage or defibrillation. Treatment of acid-base disturbances and electrolyte disorders is also important. Because of the concern over salicylate toxicity, acid-base status should be followed closely with serial blood gas and serum pH determinations.

The opioid antagonist naloxone hydrochloride is a specific antidote against respiratory depression which may result from overdose or unusual sensitivity to opioids including oxycodone. Therefore, an appropriate dose of naloxone hydrochloride should be administered (usual initial adult dose 0.4 mg-2 mg) preferably by the intravenous route, simultaneously with efforts at respiratory resuscitation. Since the duration of action of oxycodone may exceed that of the antagonist, the patient should be kept under continued surveillance and repeated doses of the antagonist should be administered as needed to maintain adequate respiration. Opioid antagonists should not be administered in the absence of clinically significant respiratory or circulatory depression secondary to oxycodone overdose. In patients who are physically dependent on any opioid agonist including oxycodone, an abrupt or complete reversal of opioid effects may precipitate an acute abstinence syndrome. The severity of the withdrawal syndrome produced will depend on the degree of physical dependence and the dose of the antagonist administered. Please see the prescribing information for the specific opioid antagonist for details of their proper use.

Gastric emptying and/or lavage may be useful in removing unabsorbed drug. This procedure is recommended as soon as possible after ingestion, even if the patient has vomited spontaneously. After lavage and/or emesis, administration of activated charcoal, as a slurry, is beneficial, if less

than three hours have passed since ingestion. Charcoal adsorption should not be employed prior to lavage and emesis.

In severe cases of salicylate overdose, hyperthermia and hypovolemia are the major immediate threats to life. Children should be sponged with tepid water. Replacement fluid should be administered intravenously and augmented with correction of acidosis. Plasma electrolytes and pH should be monitored to promote alkaline diuresis of salicylate if renal function is normal. Infusion of glucose may be required to control hypoglycemia. With more severe acute toxicity respiratory alkalosis may occur.

Hemodialysis and peritoneal dialysis can be performed to reduce the body content of aspirin. In patients with renal insufficiency or in cases of life-threatening salicylate intoxication dialysis is usually required. Exchange transfusion may be indicated in infants and young children.

In case of real or suspected overdose, a poison control center should be consulted for the treatment of salicylism.

The toxicity of oxycodone and aspirin in combination is unknown.

DOSAGE AND ADMINISTRATION

Dosage should be adjusted according to the severity of the pain and the response of the patient. It may occasionally be necessary to exceed the usual dosage recommended below in cases of more severe pain or in those patients who have become tolerant to the analgesic effect of opioids. If pain is constant, the opioid analgesic should be given at regular intervals on an around-the-clock schedule. PERCODAN tablets are given orally.

The usual dosage is one tablet every 6 hours as needed for pain. The maximum daily dose of aspirin should not exceed 4 grams or 12 tablets.

Cessation of Therapy

In patients treated with PERCODAN tablets for more than a few weeks who no longer require therapy, doses should be tapered gradually to prevent signs and symptoms of withdrawal in the physically dependent patient.

DRUG ABUSE AND DEPENDENCE

PERCODAN tablets are a Schedule II controlled substance. Oxycodone is a mu-agonist opioid with an abuse liability similar to morphine. Oxycodone, like morphine and other opioids used in analgesia, can be abused and is subject to criminal diversion.

Drug addiction is defined as an abnormal, compulsive use, use for non-medical purposes of a substance despite physical, psychological, occupational or interpersonal difficulties resulting from such use, and continued use despite harm or risk of harm. Drug addiction is a treatable disease, utilizing a multi-disciplinary approach, but relapse is common. Opioid addiction is relatively rare in patients with chronic pain but may be more common in individuals who have a past history of alcohol or substance abuse or dependence. Pseudoaddiction refers to pain relief seeking behavior of patients whose pain is poorly managed. It is considered an iatrogenic effect

of ineffective pain management. The health care provider must assess continuously the psychological and clinical condition of a pain patient in order to distinguish addiction from pseudoaddiction and thus, be able to treat the pain adequately.

Physical dependence on a prescribed medication does not signify addiction. Physical dependence involves the occurrence of a withdrawal syndrome when there is sudden reduction or cessation in drug use or if an opiate antagonist is administered. Physical dependence can be detected after a few days of opioid therapy. However, clinically significant physical dependence is only seen after several weeks of relatively high dosage therapy. In this case, abrupt discontinuation of the opioid may result in a withdrawal syndrome. If the discontinuation of opioids is therapeutically indicated, gradual tapering of the drug over a 2-week period will prevent withdrawal symptoms. The severity of the withdrawal syndrome depends primarily on the daily dosage of the opioid, the duration of therapy and medical status of the individual.

The withdrawal syndrome of oxycodone is similar to that of morphine. This syndrome is characterized by yawning, anxiety, increased heart rate and blood pressure, restlessness, nervousness, muscle aches, tremor, irritability, chills alternating with hot flashes, salivation, anorexia, severe sneezing, lacrimation, rhinorrhea, dilated pupils, diaphoresis, piloerection, nausea, vomiting, abdominal cramps, diarrhea and insomnia, and pronounced weakness and depression.

“Drug-seeking” behavior is very common in addicts and drug abusers. Drug-seeking tactics include emergency calls or visits near the end of office hours, refusal to undergo appropriate examination, testing or referral, repeated “loss” of prescriptions, tampering with prescriptions and reluctance to provide prior medical records or contact information for other treating physician(s). “Doctor shopping” to obtain additional prescriptions is common among drug abusers and people suffering from untreated addiction.

Abuse and addiction are separate and distinct from physical dependence and tolerance. Physicians should be aware that addiction may not be accompanied by concurrent tolerance and symptoms of physical dependence in all addicts. In addition, abuse of opioids can occur in the absence of true addiction and is characterized by misuse for non-medical purposes, often in combination with other psychoactive substances. Oxycodone, like other opioids, has been diverted for non-medical use. Careful record-keeping of prescribing information, including quantity, frequency, and renewal requests is strongly advised.

Proper assessment of the patient, proper prescribing practices, periodic re-evaluation of therapy, and proper dispensing and storage are appropriate measures that help to limit abuse of opioid drugs.

Like other opioid medications, PERCODAN tablets are subject to the Federal Controlled Substances Act. After chronic use, PERCODAN tablets should not be discontinued abruptly when it is thought that the patient has become physically dependent on oxycodone.

Interactions with Alcohol and Drugs of Abuse

Oxycodone may be expected to have additive effects when used in conjunction with alcohol, other opioids, or illicit drugs that cause central nervous system depression.

HOW SUPPLIED

PERCODAN (Oxycodone and Aspirin Tablets, USP), tablets are supplied as a yellow round tablet, scored and debossed with "PERCODAN" on one side and plain on the other side.

Available in:

Bottles of 100 NDC 63481-121-70

Store at 25°C (77°F); excursions permitted to 15°-30°C (59°-86°F). [See USP Controlled Room Temperature.]

Dispense in a tight, light-resistant container as defined in the USP, with a child-resistant closure (as required).

DEA Order Form Required.

Manufactured for:

Endo Pharmaceuticals Inc.

Chadds Ford, Pennsylvania 19317

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2005

2000390 / July,


Attachment 4

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NEWS RELEASE

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Endo Pharmaceuticals to Announce Second Quarter 2009 Financial Results on July 30, 2009

CHADDS FORD, Pa., July 1 /PRNewswire-FirstCall/ -- Endo Pharmaceuticals (Nasdaq: ENDP) will announce its second quarter financial results on July 30, 2009 and will host a conference call and webcast at 9:00 a.m. ET that day to discuss these results.

David P. Holveck, president and chief executive officer, Nancy J. Wysenski, chief operating officer, Alan Levin, chief financial officer, Ivan Gergel, M.D., executive vice president of research and development and Blaine Davis, vice president, corporate affairs will host the call.

Investors and other interested parties may call 800-901-5248 (domestic) or 617-786-4512 (international) and enter passcode 39225165. Please dial in 10 minutes prior to the scheduled start time.

A replay of the call will be available from July 30 at 1:30 p.m. ET until 12:00 a.m. ET on August 7 by dialing 888-286-8010 (domestic) or 617-801-6888 (international) and enter passcode 74683162.

A simultaneous webcast of the call may be accessed by visiting www.endo.com. In addition, a replay of the webcast will be available until 12:00 a.m. ET on August 7. The replay can be accessed by clicking on "Events" in the Investor Relations section of the website.

About Endo

Endo Pharmaceuticals is a specialty pharmaceutical company engaged in the research, development, sale and marketing of branded and generic prescription pharmaceuticals used to treat and manage pain, overactive bladder, prostate cancer and the early onset of puberty in children, or central precocious puberty (CPP). Its products include LIDODERM(R), a topical patch to relieve the pain of postherpetic neuralgia; PERCOCET(R) and PERCODAN(R) tablets for the relief of moderate-to-moderately severe pain; FROVA(R) tablets for the acute treatment of migraine attacks with or without aura in adults; OPANA(R) tablets for the relief of moderate-to-severe acute pain where the use of an opioid is appropriate; OPANA(R) ER tablets for the relief of moderate-to-severe pain in patients requiring continuous, around-the-clock opioid treatment for an extended period of time; and VOLTAREN(R) Gel, a nonsteroidal anti-inflammatory drug indicated for the relief of the pain of osteoarthritis of joints amenable to topical treatment such as those of the hands and the knees. Voltaren(R) Gel is owned and licensed by Novartis AG; SANCTURA(R) and its XR version for treatment of overactive bladder, VANTAS(R) for the palliative treatment of advanced prostate cancer, and SUPPRELIN(R) LA for the treatment of early onset puberty in children. The company markets its branded pharmaceutical products to physicians in pain management, neurology, surgery, oncology, endocrinology and primary care. More information, including this and past press releases of Endo Pharmaceuticals, is available at www.endo.com.

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Endo Pharmaceuticals to Present at Goldman Sachs 30th Annual Healthcare Conference

CHADDS FORD, Pa., June 5 /PRNewswire-FirstCall/ -- Endo Pharmaceuticals (Nasdaq: ENDP) announced today that it will present at the Goldman Sachs 30th Annual Healthcare Conference on Wednesday, June 10, 2009 at 4:30 pm Eastern Time. Dave Holveck, President and Chief Executive Officer of Endo, will review the company's products and development programs.

The presentation will be webcast live and can be accessed from Endo's website at www.endo.com under the investors section.

About Endo

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NEWS RELEASE

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Endo Announces Compensation for New CFO Alan Levin

CHADDS FORD, Pa., May 29 /PRNewswire-FirstCall/ -- Endo Pharmaceuticals (Nasdaq: ENDP) announced today that the company is granting Alan Levin a sign-on award of 43,500 restricted stock units and an option to purchase 80,000 shares of Endo common stock in connection with his appointment as Endo's executive vice president and chief financial officer. These grants are being made outside of the Endo 2007 stock incentive plan but are subject to the terms and conditions of the plan with a ten-year term and four-year vesting. The option exercise price will be equal to the closing price of Endo's common stock on June 1, 2009, the first day of Mr. Levin's employment with the company.

About Endo

Endo Pharmaceuticals is a specialty pharmaceutical company engaged in the research, development, sale and marketing of branded and generic prescription pharmaceuticals used to treat and manage pain, overactive bladder, prostate cancer and the early onset of puberty in children, or central precocious puberty (CPP). Its products include LIDODERM(R), a topical patch to relieve the pain of postherpetic neuralgia; PERCOCET(R) and PERCODAN(R) tablets for the relief of moderate-to-moderately severe pain; FROVA(R), tablets for the acute treatment of migraine attacks with or without aura in adults; OPANA(R) tablets for the relief of moderate-to-severe acute pain where the use of an opioid is appropriate; OPANA(R) ER tablets for the relief of moderate-to-severe pain in patients requiring continuous, around-the-clock opioid treatment for an extended period of time; VOLTAREN(R) GEL, a nonsteroidal anti-inflammatory drug indicated for the relief of the pain of osteoarthritis of joints amenable to topical treatment, such as those of the hands and the knees; SANCTURA(R) and its XR version for treatment of overactive bladder; VANTAS(R) for the palliative treatment of advanced prostate cancer; and SUPPRELIN(R) LA for the treatment of early onset puberty in children. The company markets its branded pharmaceutical products to physicians in pain management, neurology, surgery, oncology, and primary care. More information, including this and past press releases of Endo Pharmaceuticals, is available at www.endo.com.

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Attachment 5

Library of Congress Documents

Bates #	Date	Periodical	Headline	Comments/Remarks
10507 - 10509	09/03/59	Los Angeles Times	11 Parole Agents Begin Training in Dope Battle	
10510 - 10510	10/11/61	Los Angeles Times	Stricter Control Asked for Pain-Killing Drug	
10511 - 1-512	05/30/62	Los Angeles Times	White House Calls Parley on Narcotics	
10513 - 10513	09/30/62	The New York Times	Criminals at Large	
10514 - 10517	02/01/63	Los Angeles Times	Curbs Asked on Dangerous Drug Sales	
10518 - 10519	03/25/63	Los Angeles Times	Bill to Curb Perilous Drugs to Get Airing	
10520 - 10525	03/26/63	Los Angeles Times	Legal Drug Use 'Out of Control', Mosk Says	
10526 - 10526	03/28/63	Los Angeles Times	Bill to Control Use of Drug Percodan Killed	
10527 - 10527	03/28/63	Los Angeles Times	New Proposals for Drug Regulation	
10528 - 10528	04/03/63	Los Angeles Times	Day In Sacramento - Narcotics	
10529 - 10529	04/16/63	Los Angeles Times	Senate Unit Approves Curbing Percodan	
10530 - 10530	04/21/63	Los Angeles Times	Chemical Codes Help Brain Circuits - Two Doctors Help	
10531 - 10531	04/25/63	Los Angeles Times	Curb Voted on Frauds in Drug Prescription - Senate Approves Measure to Bar Forgery in Obtaining Pain-Killing Percodan	
10532 - 10532	04/25/63	Los Angeles Times	Day in Sacramento - Bills Passed - Narcotics	
10533 - 10533	05/08/63	Los Angeles Times	Doctor Prescribed for Dead Man, Court Told	
10475 - 10475	05/10/63	Los Angeles Times	Yorty-Wyman - Brown Comments	Some of these articles seem to be mixed in but there is no way to separate them
10476 - 10482	05/16/63	Los Angeles Times	Mosk Raps Defeat of Drug Bill	
10483 - 10483	05/16/63	The Washington Post	Yorty Swats at State Democrats	
10484 - 10484	05/17/63	Los Angeles Times	Drug Protection Refused Again	
10485 - 10486	05/18/63	Los Angeles Times	Medical Leader Notes Percodan Drug Danger	
10487 - 10487	05/18/63	Los Angeles Times	News Summary - Unruh Blasts Mosk on Percodan	
10488 - 10489	05/18/63	Los Angeles Times	Unruh Blasts Mosk's Views on Percodan	
10490 - 10490	05/19/63	Los Angeles Times	Atty. Gen. Mosk Clarifies the Characteristics of Percodan	
10491 - 10492	05/21/63	Los Angeles Times	Percodan Bill Passes	
10493 - 10494	05/22/63	Los Angeles Times	U.S. Senators Call Inquiry on Percodan	
10495 - 10496	05/23/63	Los Angeles Times	Wyman Assails Yorty Claim in Percodan Row	

Library of Congress Documents

Bates #	Date	Periodical	Headline	Comments/Remarks
10499 - 10499	05/25/63	Los Angeles Times	TheLin and Percodan Bill	
10500 - 10500	05/26/63	The New York Times	Los Angeles Vote is Test for Mayor	
10501 - 10501	05/28/63	Los Angeles Times	County Percodan Law Ruled Out by Counsel	
10502 - 10502	05/28/63	Los Angeles Times	News Summary - The City and The State - Ruling on Percodan	
10503 - 10504	05/29/63	Los Angeles Times	Percodan Control Will Be Costly, Mosk Says	Two copies of the same article
10505 - 10506	05/29/63	Los Angeles Times	News Summary - The City and The State - Percodan Control	
10412 - 10412	05/31/63	Los Angeles Times	Percodan Maker Uses Deception, Mosk Says	
10413 - 10413	05/31/63	Los Angeles Times	News Summary - Mosk Hits Percodan Maker	
10414 - 10414	05/31/63	Los Angeles Times	News Summary - Mosk Hits Percodan Maker	
10415 - 10415	06/01/63	Los Angeles Times	Percodan Controversy Explained by Doctor	
10416 - 10416	06/02/63	The New York Times	California Seeks Inquiry on Pain-Relieving Drug	
10417 - 10417	06/06/63	Los Angeles Times	Suit Charges Lobbyist Got \$20,000 for Bribes	
10418 - 10418	06/07/63	Los Angeles Times	Doctor Given 5-Year Term in Drug Case	
10419 - 10419	06/11/63	Los Angeles Times	Mosk Raps Assembly's Vote	
10420 - 10420	07/04/63	Los Angeles Times	Yorty	Only a portion of the article
10421 - 10421	07/05/63	Los Angeles Times	Letters to the Times - U.S. Government Gives Doctors Right to Telephone Prescriptions	
10422 - 10422	07/08/63	The Chicago Tribune	3 Democrats in California Party Fight	
10423 - 10423	07/27/63	The Chicago Tribune	Pleads Guilty	Article regarding Marie McDonald forging two prescriptions for Percodan
10424 - 10424	07/27/63	Los Angeles Times	Marie M'Donald Pleads Guilty to Drug Charge	
10425 - 10425	07/28/63	The Washington Post	The Body' Arrested	
10426 - 10426	08/14/63	Los Angeles Times	Mosk Backs Warnign on Percodan	
10427 - 10427	08/24/63	The Chicago Tribune	Actress Fined; Forged Drug Prescriptions	
10428 - 10428	08/24/63	Los Angeles Times	Marie McDonald Given Probation in Drug Case	
10429 - 10429	08/24/63	The New York Times	Marie McDonald Fined \$250	
10430 - 10430	09/23/63	Los Angeles Times	Addicts Differ on State Rehabilitation Program	
10431 - 10431	12/29/63	The New York Times	News Summary and Index	
10432 - 10432	12/29/63	The New York Times	U.S. Tightens Rule on Sale of Drug	

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Bates #	Date	Periodical	Headline	Comments/Remarks
10433 - 10433	12/30/63	Los Angeles Times	Mosk Predicts Tighter Control for Percodan	
10434 - 10434	01/03/64	Los Angeles Times	News Summary - Restrictions on Percodan	
10435 - 10436	01/03/64	Los Angeles Times	Restrictions on Percodan Purchases Set	
10437 - 10437	01/07/64	Los Angeles Times	A Resolution of the Percodan Row	
10438 - 10438	01/24/64	Los Angeles Times	Yorty, Senator at Odds on Drug Investigation	
10439 - 10440	01/28/64	Los Angeles Times	Details of Sinatra Case Arrests Told by FBI	
10441 - 10441	02/05/64	Los Angeles Times	Yorty, Dorn Urge Brown to Seek Percodan Curbs	
10442 - 10443	03/20/64	Los Angeles Times	Brown Urged to Push Curb on Percodan	Two copies of the same article
10444 - 10444	03/21/64	Los Angeles Times	City Calls for Curbs on Percodan	
10445 - 10445	03/23/64	Los Angeles Times	Brown Won't Act on Drug, Mayor Says	
10446 - 10446	03/28/64	Los Angeles Times	Legislation to Curb Percodan Asked	
10447 - 10448	04/26/64	Los Angeles Times	Addict Writes Her Epitaph on Forged Prescriptions	
10449 - 10449	05/02/64	Los Angeles Times	Supervisors Ask Tight Curb on Drug Percodan	
10450 - 10450	05/05/64	Los Angeles Times	U.S. rto require Prescription for Percodan	
10451 - 10451	05/12/64	Los Angeles Times	Yorty Urges Tighter Control of Percodan	
10452 - 10452	05/14/64	Los Angeles Times	New Summary - The City and The State - Percodan Legal Controls	
10453 - 10453	05/14/64	Los Angeles Times	The Day in Sacramento - The Governor	
10454 - 10455	05/14/64	Los Angeles Times	Yorty makes New Bid for Drug Curb	
10456 - 10456	05/15/64	Los Angeles Times	Burns Opposes Percodan Bill at This Time	
10457 - 10458	05/18/64	Los Angeles Times	Needlepoint-of-View	Two copies of the same article
10497 - 10498	05/24/64	Los Angeles Times	Yorty's Percodan Probe Story Labeled Ridiculous	
10459 - 10460	05/27/64	Los Angeles Times	High Priority for Drug Protection	Two copies of the same article
10461 - 10461	05/27/64	Los Angeles Times	Mayor Yorty Answers Bergholz's Prediction of Brown Showdown	
10462 - 10462	05/27/64	Los Angeles Times	Percodan Curb Petitions Urged	
10463 - 10463	05/30/64	Los Angeles Times	Yorty Accuses Brown of 'Bossism' Attempt - Percodan Affair	
10464 - 10465	05/31/64	The New York Times	Democrats on Coast Also Wage Fight for Convention Delegates	

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10466 - 10467	06/04/64	The Christian Science Monitor	Brown Crushes Yorty Rebellion	
10468 - 10468	07/14/64	Los Angeles Times	Man Held on Forgery in Drug Case	
10469 - 10469	07/29/64	Los Angeles Times	Pharmacist Held in Sale of Percodan	
10470 - 10470	08/14/64	Los Angeles Times	Three Accused Officers Quit in Torrance	
10471 - 10471	08/18/64	Los Angeles Times	Torrance Police Probe by Grand Jury Ordered	
10472 - 10472	09/16/64	Los Angeles Times	Jury Drops Police Case	
10473 - 10474	11/21/64	Los Angeles Times	Supervisors Convention Back Sales Tax Boost - Revenue Gain Seen	
10346 - 10347	12/17/64	Los Angeles Times	State to Again Seek Tighter Percodan Rule	
10348 - 10348	01/03/65	Los Angeles Times	Tougher Narcotics Controls Needed	
10349 - 10349	01/05/65	Los Angeles Times	Day In Sacramento	
10350 - 10351	01/05/65	Los Angeles Times	Expel, Fire - Resolutions Aim at UC Sit-in Fight	
10352 - 10354	01/06/65	Los Angeles Times	Tax Hike Certain, Brown Says	
10355 - 10355	02/05/65	Los Angeles Times	Lynch Outlines 8-Point Attack on Dope Crime	
10356 - 10357	03/03/65	Los Angeles Times	Bettering Enforcement of the Narcotic Laws	
10358 - 10359	03/31/65	Los Angeles Times	Assembly Committee Approves Percodan Bill	
10360 - 10360	04/16/65	Los Angeles Times	\$5 Million in Narcotics Will Go Up in Smoke	
10361 - 10361	04/24/65	Los Angeles Times	Percodan Drug Bill Passed by Senate Group	
10362 - 10362	04/29/65	Los Angeles Times	Senat Approves Bill to Restrict Percodan	
10363 - 10364	05/02/65	Los Angeles Times	The State - Percodan Sales Restricted	
10365 - 10365	05/05/65	Los Angeles Times	Percodan Bill Passes	
10366 - 10367	05/09/65	Los Angeles Times	The State - Senate Approves It	
10368 - 10369	05/19/65	Los Angeles Times	Day In Sacramento	
10370 - 10370	06/20/65	Los Angeles Times	Governor's Bill Didn't Fare Well	
10371 - 10386	09/16/65	Los Angeles Times	Assembly	
10387 - 10387	09/19/65	Los Angeles Times	Voted Aye	
10388 - 10389	10/22/65	Los Angeles Times	Actress Marie McDonald, 42 Found Dead	
10390 - 10391	07/22/66	The New York Times	Dodd Double Charge For Air Fare Alleged	
10392 - 10392	01/26/67	Los Angeles Times	Auditor's Report on Administrator's Office Readied	
10393 - 10393	08/07/67	Los Angeles Times	Allergy Is a Factor in Diagnosis of Arthritis	
10394 - 10395	09/22/67	Los Angeles Times	New Plan for Hospitalizing Police and Firemen	

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Bates #	Date	Periodical	Headline	Comments/Remarks
10396 - 10397	03/10/68	The Chicago Tribune	How to Keep Well	
10398 - 10398	06/16/68	Los Angeles Times	The Doctor Says	
10399 - 10399	10/14/68	Los Angeles Times	Dr. Alvarez Says: Arteriosclerosis Hard to Correct	
10400 - 10401	11/03/68	Los Angeles Times	The Doctor Says	
10402 - 10403	04/20/69	Los Angeles Times	Relief for 'restless legs'	
10404 - 10405	07/14/70	The New York Times	Dupont, in Reversal, Restores Drug to Addiction Researchers	
10406 - 10411	06/15/73	Los Angeles Times	No Consensus on Why, How - Researchers Agree on One Point ---Acupuncture Works	
10288 - 10291	11/28/73	Los Angeles Times	Mystery Surrounds Liz Taylor's Illness	
10292 - 10293	06/10/74	Los Angeles Times	Carbon Monoxide Danger in Fires	
10294 - 10297	11/03/74	The New York Times	Bringing the war home - Dog Soldiers	
10303 - 10306	08/15/75	The New York Times	Court Voids A Drug Log on Patients	Two copies of the same article
10307 - 10308	09/06/75	Los Angeles Times	Ex-Raider Sues, Says He Was Given Drugs	Two Copies of the same article
10298 - 10302	11/17/75	Los Angeles Times	Lesbian Alcoholics: Part II - Therapy Centers Point the Way Back	Two Copies of the same article
10309 - 10310	03/09/76	Los Angeles Times	The Southland - \$300,000 in Gems Stolen	Two copies of the same article
10311 - 10312	09/16/76	The Christian Science Monitor	Fraudulent drug traffic: how it works - who pays	
10313 - 10314	01/04/77	Los Angeles Times	Your Prescriptions - The Actions of Digitalis Are Still Not Wholly Understood	Two copies of the same article
10315 - 10317	06/26/77	Los Angeles Times	Ex-Chef Calls Marx Home a 'Battlefield'	
10318 - 10319	06/28/77	The Washington Post	Personalities	
10320 - 10320	11/22/77	Los Angeles Times	Your Prescriptions - Indocin: A Welcome Weapon in the War Against Arthritis	
10321 - 10325	12/16/77	Los Angeles Times	Millionaire's Trial Rife With Mystery	
10326 - 10329	04/14/78	Los Angeles Times	State Accuses Another 15 Doctors of Pushing Drugs	Two copies of the same article
10330 - 10330	07/11/78	Los Angeles Times	Your Prescriptions - Simethicone is a Drug Used For Dealing with Flatulence	
10331 - 10334	09/01/78	Los Angeles Times	Surgery Called A Last Resort	
10335 - 10338	09/24/78	The Washington Post	More Blood and Money	Two copies of the same article

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Bates #	Date	Periodical	Headline	Comments/Remarks
10339 - 10339	11/27/78	Los Angeles Times	Was Addicted to Painkiller 13 Years, Jerry Lewis Says	
10340 - 10340	11/28/78	Los Angeles Times	Lewis Stiffens Backbone, Kicks Pill Habit	
10341 - 10341	12/05/78	The Washington Post	Personalities	Article about Lewis Kicking habit
10342 - 10342	12/24/78	The Washington Post	Three-hour version of 'Les Miserables'	
10343 - 10344	01/08/79	Los Angeles Times	Drug Rehabilitation for the Wealthy	
10345 - 10345	01/21/79	Los Angeles Times	A psychiatrist's sexual fantasies	
10243 - 10244	08/29/79	The Chicago Tribune	Ryan Looses ground, chemotherapy begins	
10245 - 10245	09/11/79	Los Angeles Times	Doctor Accused of Giving Uppers , Downers	
10246 - 10246	09/11/79	Los Angeles Times	Prescriptions: A Drug Used to Treat Urinary Tract Infections	
10247 - 10247	09/12/79	The Chicago Tribune	Elvis' doctor faces drug-abuse charges	
10248 - 10249	09/12/79	The The New York Times	Notes on People - Presly's Doctor Accused in Prescibin of Drugs	
10250 - 10250	09/12/79	The Washington Post	Personalities	Article about Presley's doctor being brought up on drug charges
10251 - 10251	09/16/79	The Washington Post	2 Men, 1 Woman Rob Pharmacy of Drugs, Money	
10252 - 10253	09/23/79	The New York Times	Presley Associates Say Torment and Drugs Marked Final Months	
10254 - 10262	10/28/79	The Chicago Tribune	Drug Firms waging opium war with U.S.	Two copies of the same article
10263 - 10263	10/30/79	Los Angeles Times	Prescriptions: Kenalog is One of the Steriod Drugs	
10264 - 10265	11/04/79	Los Angeles Times	Air Force Grounds Saccharin	
10266 - 10267	11/15/79	The New York Times	Around the Nation - 6 Guards Among 13 Held In Rhode Island Drug Case	
10268 - 10270	11/25/79	The New York Times	Show-Biz as Subject, Again	
10271 - 10271	12/30/79	The New York Times	Cocaine May Be Chic, Boose Is the Big Worry	
10272 - 10272	01/19/80	The Washington Post	Personalities	
10273 - 10273	03/18/80	The Washington Post	Fairfax County Jury Indicts Contractor On Bribery Charges	

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10274 - 10278	05/05/80	Los Angeles Times	Hug Therapy: 'You Just Can't Beat It'	Two Copies of the same document
10279 - 10279	05/17/80	The New York Times	Presley Doctor Indicted on Drugs	
10280 - 10280	05/17/80	The Washington Post	Doctor Indicted as Overprescriber For Presley and Jerry Lee Lewis	
10281 - 10281	06/08/80	The Chicago Tribune	Pupils share learn from dying teacher	
10282 - 10282	08/22/80	The Washington Post	Pharmacy Accused of Violating U.S. Law on Controlled Drugs	
10283 - 10284	08/24/80	Los Angeles Times	Talking Therapy Work Where Surgery Fails'	
10285 - 10285	08/30/80	The Washington Post	Personalities	
10286 - 10287	09/14/80	Los Angeles Times	Therapy Works Where Surgery Fails	
10189 - 10189	09/23/80	The Washington Post	Dentist Given 10 Years on Drug Charges	
10190 - 10190	10/05/80	Los Angeles Times	Chronic Sufferers Win Relief, Freedom From Drugs at New Hope Pain Center	
10191 - 10193	12/07/80	The The New York Times	Monk	Article about doctor who used Percodan to control elderly woman
10194 - 10195	12/27/80	The Washington Post	Fairfax Jail: Alcohol, Drug, Mental Problems Stored Here	
10196 - 10197	01/27/81	The The New York Times	Pharmacist Tells of Prescriptions Mrs. Harris Got	
10198 - 10204	03/01/81	The Washington Post	Kennedy Kids - Here come the 29 Handsome, Privileged Grandchildren of Joseph and Rose	
10205 - 10205	05/21/81	The Washington Post	Fairfax Police Arrest 2 Men in Drug Scheme	
10206 - 10206	06/13/81	The Washington Post	\$3.7 Million in Civil Penalties Imposed on NE Pharmacy for Drug Violations	
10207 - 10207	07/04/81	The Washington Post	Far Too Much, Too Quickly	
10208 - 10210	07/29/81	Los Angeles Times	Anti-Drug Fervor Gone Too Far, Doctor Says	
10211 - 10211	10/06/81	The Washington Post	Silver Spring Pharmacist Accused of Improperly Dispensing Drugs	
10212 - 10212	10/27/81	The New York Times	3 Charges Against Presley Doctor Dismissed in Trial on Prescriptions	

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10213 - 10213	07/01/82	Los Angeles Times	Pharmacy Owner Jailed for Contempt - Term to Continue Until She Submits Prescriptions Sought in Probe	
10214 - 10214	07/17/82	Los Angeles Times	Judge Places Restrictions on Drug Handling by Pharmacy	
10215 - 10216	07/18/82	The Chicago Tribune	Ex-junkie doctor recalls 'ultimate low'	
10217 - 10219	08/27/82	Los Angeles Times	Physician's Tale: A Slide Into Drug Use	Article is the same as the one above but has a different title because they are two different newspapers
10220 - 10222	09/07/82	Los Angeles Times	Medi-Cal Cutbacks Worry S.D. Doctors - Physicians Fear Loss of Income, Lack of Minimum Care for the Poor, Elderly	
10223 - 10226	10/07/82	Los Angeles Times	Eddie Nash Convicted on Cocaine Count - L.A. Nightclub Owner Remanded to Jail in Lieu of \$5-Million Bail	
10227 - 10229	10/12/82	Los Angeles Times	Pregnant Woman Warned Again About Aspirin Use	
10230 - 10231	10/24/82	The Washington Post	What he Did for Love	
10232 - 10232	11/13/82	Los Angeles Times	Drug Charges Name Actor	
10235 - 10235	11/13/82	The Washington Post	Personalities	Article about charging of Richard Dreyfuss
10233 - 10234	11/23/82	Los Angeles Times	Nash Receives 8-Year Term in Dope Case	
10236 - 10236	11/23/82	Los Angeles Times	Nash Sentenced to Prison, Fined in Cocaine Case	
10237 - 10238	12/04/82	Los Angeles Times	Dreyfuss Pleads Innocent to Drug Possession Charges	Two copies of the same article
10239 - 10239	12/04/82	The Washington Post	Personalities	Article about Dreyfuss and drug charges
10089 - 10089	12/08/82	The Washington Post	Listless 'ClooneyStory'	
10240 - 10240	12/18/82	The Washington Post	Personalities	Article about Dreyfuss and drug charges

Endo Pharmaceuticals Interventional Spine, Inc.

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10090 - 10093	12/26/82	Los Angeles Times	Calendar - the New Hollywood connection: 'cocaine anonymous'	
10094 - 10095	01/04/83	Los Angeles Times	View - Drug Okd for Back Pain	
10096 - 10096	02/20/83	The New York Times	Prescription Drugs' Side Effects Revealed	
10097 - 10098	03/02/83	The Washington Post	U.S. Report Says Medicaid Used by City Drug Abusers	
10241 - 10242	03/04/83	Los Angeles Times	The Region - Court to Rule on Legal Fee	
10099 - 10102	06/16/83	The Wall Street Journal	After a Slow Start, DuPont Pushes Harder For a Bigger Share of Pharmaceutical Sales	2 Copies of the same article
10103 - 10103	07/24/83	The New York Times	Fiction in Brief - Godplayer	
10104 - 10105	08/22/83	Los Angeles Times	Woman's Efforts End in Charging of Doctor - 'Excessive' Prescriptions Alleged in Drug Overdose Death of Her Son	
10106 - 10106	08/28/83	Los Angeles Times	Nudging the needless into the nether world	
10107 - 10108	08/28/83	The Washington Post	Melly Reuling: A debutante wilderness leader	
10109 - 10109	09/03/83	Los Angeles Times	Judge Dismisses Drug Charges Against Actor Richard Dreyfuss	
10110 - 10111	09/03/83	The Washington Post	Personalities	Articles discussing Richard Dreyfuss Charges being dismissed
10112 - 10114	10/25/83	The New York Times	Sanderson Looks Inside to Beat Pain	
10115 - 10116	11/10/83	Los Angeles Times	Doctor Facing 12 Drug Counts Slashes Himself	
10117 - 10117	11/16/83	The New York Times	Medich Charged	
10118 - 10118	11/16/83	The Washington Post	Jim Brown Bullish on Comeback	Article has small blurb about drug abuse of George (Doc) Medich
10119 - 10119	04/21/84	The New York Times	Congress's Physician Changed Medication Supplier to Keep Records Secret	
10120 - 10121	04/26/84	The Chicago Tribune	A life of torment - David Kennedy's tears came too late	
10122 - 10122	05/30/84	The Wall Street Journal	The Return of Jerry Lewis	
10123 - 10124	06/30/84	The Washington Post	Judge's Answers to Drug Abuse: Let Addicts Kill Themselves	

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Bates #	Date	Periodical	Headline	Comments/Remarks
10125 - 10126	08/11/84	The Chicago Tribune	Armstrong Indicted	
10127 - 10127	08/11/84	The New York Times	Ex-Bronco Indicted on Pill Use	
10128 - 10128	08/13/84	The Chicago Tribune	Armstrong's Pain	Article blurb about Armstrong's Pain
10129 - 10130	08/14/84	The Washington Post	FanFare	
10131 - 10133	08/19/84	The New York Times	For Armstrong, Pains are Lingering	
10134 - 10135	09/01/84	The Washington Post	VA Police Say Man Admitted to 2 Murders	
10136 - 10136	10/17/84	The The New York Times	Armstrong's Trial Set	
10137 - 10137	10/28/84	The New York Times	A True-Life Adventure Tale	
10534 - 10535	12/13/84	The Washington Post	Farifax County Mason District - Thefts/Break-ins	
10536 - 10537	01/08/85	The Wall Street Journal	The Royal Anniversary: Elvis Presley's Fiftieth	
10538 - 10539	01/13/85	The Chicago Tribune	Headaches - Why you hurt	
10540 - 10540	01/27/85	The Washington Post	Letters to the Editor - Yes - 'Congress Could Relieve the Pain'	
10138 - 10139	02/04/85	The New York Times	Elizabeth Taylor: Journal of a Recovery	
10140 - 10140	02/04/85	The Washington Post	Taylor Says Engagement is Off	
10141 - 10141	02/05/85	The Washington Post	Liz Watch - Dennis Stein: From Next to Nixed	
10142 - 10145	02/06/85	The Chicago Tribune	Liz on Liquor, drugs: 'I needed oblivion'	two copies of the same article
10146 - 10148	04/23/85	Los Angeles Times	Hidden Pitfall Could Trip Up the Abstainer	Two copies of the same article but second article has different title "
10149 - 10149	04/25/85	The Washington Post	Doctor Guilty of Prescribing Unneeded Drugs	Hidden Lures for Recovering Drinkers"
10150 - 10151	05/15/85	Los Angeles Times	Chief Gates' Son Arrested in Orange County Robbery	
10152 - 10153	05/15/85	Los Angeles Times	Gates' Son Arrested on Charge of Robbing Pharmacy of Drugs	
10154 - 10155	05/15/85	Los Angeles Times	L.A. Chief Gates' Son Arrested in Drugstore Holdup	
10156 - 10156	05/16/85	Los Angeles Times	Chief Gates' Son Enters Pleas of Non Guilty in Drug, Jewel Thefts	

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10157 - 10157	06/05/85	The Washington Post	Shingles, Fingernail Ridges, Fibroid Tumore and Childbirth	
10158 - 10159	06/23/85	The Chicago Tribune	Fiction - Roth: A maddening writer attuned to our struggle for freedom	
10160 - 10160	07/23/85	The Washington Post	Around the Region - Heroin Victim's Doctor Sued	
10541 - 10542	09/11/85	The Washington Post	Around the Region - Doctors Jail Sentence Suspended	
10543 - 10545	09/25/85	Los Angeles Times	A Bright Goal Despite Injury	
10563 - 10565	09/25/85	Los Angeles Times	A Bright Goal Despite Injury	Duplicate
10546 - 10546	09/26/85	Los Angeles Times	Surfer Overcomes Sting of Pain to Ride Waves	
10566 - 10567	09/26/85	Los Angeles Times	Surfer Overcomes Sting of Pain to Ride Waves	Duplicate - Two copies of the same article
10161 - 10170	10/06/85	Los Angeles Times	Few Go to Jail; Murder - ar an Act of Compassion?	Two copies of the same article
10547 - 10558	10/06/85	Los Angeles Times	Murder - or an Act of Compassion?	Two copies of the same article
10568 - 10572	10/06/85	Los Angeles Times	Murder - or an Act of Compassion?	Duplicate
10171 - 10173	11/28/85	Los Angeles Times	Drug Entrepreneur Tells His Story From Jail	
10559 - 10561	11/28/85	Los Angeles Times	Drug Entrepreneur Tells His Story From Jail	Duplicate
10174 - 10175	12/04/85	The Chicago Tribune	American Spectator magazine's burning issue: Celebrity gift-book suggestions	
10562 - 10562	12/04/85	The Chicago Tribune	Tempo	Miscellaneous Coverage of unknown article
10176 - 10179	12/17/85	Los Angeles Times	Questioning the Safety of Sweetner	two copies of the same article
10573 - 10578	01/26/86	Los Angeles Times	High Anxiety	
10579 - 10581	02/18/86	The Washington Post	D.C. Investigative Team Takes Aim at Consumer Fraud	
10582 - 10582	02/26/86	The Washington Post	Wheat Sensitivity; Painkillers; Menopause	
10583 - 10586	04/27/86	The Washington Post	Reflections on a generation of Women who were already wives and mothers before the '60s, womens lib, natural childbirth and careers	

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10180 - 10181	05/02/86	The New York Times	Screen: 'Jo Jo Dancer'	
10587 - 10587	05/02/86	Los Angeles Times	The Region - Landis Loses 'Twilight Zone' Trial Plea	
10588 - 10588	05/02/86	The New York Times	Screen: 'Jo Jo Dancer'	Duplicate
10182 - 10183	05/28/86	The Washington Post	Panel Finds Hospitals Stingy with Pain Drugs	
10184 - 10185	06/06/86	The Washington Post	Doctors' Visits End in VA Escapee's Capture	
10186 - 10186	06/30/86	The Washington Post	Empty Affluence: A Grim Slice of the 'Good Life'	
10589 - 10596	07/24/86	The Washington Post	Montgomery 'Pill Patrol' Stays Busy	4 copies of the same article
10597 - 10597	10/29/86	The Washington Post	The Psychiatrist & the Women: A Legal War	
10598 - 10598	11/29/86	New Pittsburgh Courier	Migraines & Other Headaches or Real Men Do Take Aspirin	
10000 - 10001	12/03/86	The Washington Post	Fanfare - Colleges	
10187 - 10188	12/03/86	Los Angeles Times	Prescription Drug Charges hit BYU Team	
10599 - 10600	12/03/86	Los Angeles Times	Prescription Drug Charges hit BYU Team	
10002 - 10002	12/04/86	The Chicago Tribune	College Football - Notes	
10003 - 10004	12/10/86	The Washington Post	Fanfare - Husband of Rams Owner Sentenced	
10005 - 10005	12/11/86	The Washington Post	For the Record	
10006 - 10006	12/13/86	Los Angeles Times	Newsweek - Bill Johnson Injured During Downhill Training, to Miss Rest of Season	
10007 - 10007	12/13/86	Los Angeles Times	Ski Accident Injures Bill Johnson	
10008 - 10009	12/30/86	Los Angeles Times	Fitting Match: UCLA vs. BYU	
10010 - 10011	12/31/86	Los Angeles Times	Fitting Match: UCLA vs. BYU	Duplicate
10012 - 10015	01/06/87	The Washington Post	Roth's Zuckerman Redux	
10016 - 10017	02/06/87	The New York Times	Scouting - What Did a Doctor Order?	
10018 - 10019	02/08/87	The New York Times	Infante Wins Suit	
10020 - 10022	02/23/87	The New York Times	Sports World Specials	
10023 - 10024	04/02/87	The Washington Post	Getting a Move on With Software Help	
10025 - 10025	04/11/87	The New York Times	Sports People - B.Y.U Expels 2	
10026 - 10027	05/10/87	The Washington Post	A Mecham Lament: The Spice Isn't Right	
10028 - 10028	08/11/87	The Washington Post	Vignettes of Lotus Land	
10601 - 10605	08/13/87	The Washington Post	Carrie Fisher's Candid Confessions	

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Bates #	Date	Periodical	Headline	Comments/Remarks
10605.1 - 1065.1	11/13/87	The Washington Post	NIH Doctor Held Without Bond in Prescription Case	
10606 - 10609	01/12/88	The Washington Post	Testing the Scientist - Government Wide Drug-Testing Plan Upsets the NIH Research Community	
10625 - 10625	01/16/88	The Wall Street Journal	Medical Problems - DuPont's Big Drive to Enter Drug Field Proves Disappointing	Duplicate
10610 - 10610	01/31/88	The Washington Post	Kodak's Leap Into Pharmaceuticals a Gamble	
10611 - 10612	02/23/88	The Washington Post	Doctor Accused of Selling Illicit Prescriptions Missing	
10613 - 10613	04/05/88	The New York Times	Heyward to Be in N.F.L. Draft	
10614 - 10617	10/14/88	The New York Times	At the Bar	Two copies of the same article
10618 - 10620	10/17/88	The New York Times	Health Care on the Border: Poor Go to Mexico	
10621 - 10621	10/26/88	The Washington Post	Fanfare - Jurisprudence	
10622 - 10622	12/06/88	The Washington Post	On the Pulse	
10623 - 10623	12/17/88	The Washington Post	Drugs-for-Sex Arrest in Arundel	
10624 - 10624	12/18/88	The New York Times	In Short - Anna L.M.N.O.	
10029 - 10032	01/16/89	The Wall Street Journal	Medical Problems - DuPont's Big Drive to Enter Drug Field Proves Disappointing	
10033 - 10034	01/20/89	The New York Times	Books of the Times - Ecstasies and Agonies of he Neurotic Life	
10626 - 10626	01/20/89	The New York Times	The Ecstasies and Agonies of the Neurotic Life	
10035 - 10035	02/07/89	The Washington Post	Healthtalk - How One Doctor Kicked Her Habit	
10036 - 10036	06/01/89	The Wall Street Journal	A '60s Rocker in the '80s	
10037 - 10038	10/13/89	The Washington Post	Maryland Unveils Drug Plan	
10039 - 10040	11/26/89	The Washington Post	Maryland Seeks Way to Put a Lid on Prescription Drug Abuse	
10041 - 10045	12/07/89	The Washington Post	How Not to Put a Lid on Prescription Abuse	1 Article - 5 Copies
10046 - 10047	12/23/89	New Pittsburgh Courier	Specter Tours Maternal Addiction Project	
10048 - 10049	01/28/90	The Washington Post	Substance Abuse - The High and the Mighty High	
10638 - 10640	02/18/90	The New York Times	Medicaid is Denied Discount Drugs Despite a New Law	

Library of Congress Documents

Bates #	Date	Periodical	Headline	Comments/Remarks
10642 - 10644	02/18/90	The New York Times	Medicaid is Denied Discount Drugs Despite a New Law	Duplicate
10050 - 10050	03/28/90	The Washington Post	Narcotics Bill Moves On	
10051 - 10051	03/29/90	The Washington Post	Attacking Prescription Drug Abuse	
10627 - 10627	04/21/90	The Washington Post	Taylor's Prescriptions	
10628 - 10630	04/29/90	The Washington Post	That Back's Gotta Come Out of There, Mr. Allen	
10631 - 10631	05/08/90	The Washington Post	Help for Migraines - Narcotic Pain Killers	
10632 - 10636	09/12/90	The New York Times	Down and Out at the Top in Hollywood	Two copies of the same article
10637 - 10637	10/25/90	The Washington Post	Former BWI Commuter Pilot Charged in Prescription Scam	
10641 - 10641	10/25/90	The Washington Post	Former BWI Commuter Pilot Charged in Prescription Scam	Duplicate
10645 - 10647	03/04/91	The Wall Street Journal	Breakthrough in Birth Control May Elude Poor	
10648 - 10651	03/26/91	The Washington Post	The Puzzle of Addiction	
10652 - 10653	04/10/91	The Washington Post	A Heaping Pleatful of Dirt Just What We Ordered	
10654 - 10655	01/04/92	The Washington Post	Inmates Say Barry Had Sex With Visitor	
10656 - 10658	01/06/92	The Washington Post	Barry Says Sex Claim Is False	
10659 - 10661	01/11/92	The Washington Post	Barry Sent to Another Penitentiary	
10662 - 10663	01/17/92	The New York Times	As Computers Track Drugs, Fears of Abuse Arise	
10664 - 10664	03/02/92	The Washington Post	The Misguided Stamp of Approval	
10665 - 10667	03/19/92	The Washington Post	Targeting Dealers At Clinics	
10668 - 10668	05/16/92	The Washington Post	Montgomery Doctor Convicted of Selling Painkiller Prescriptions	
10669 - 10669	05/30/92	The Washington Post	Poison Ivy: Tender Creeper	
10052 - 10053	07/14/92	The Washington Post	Fugitive Physician Sentenced	
10670 - 10671	07/14/92	The Washington Post	Fugitive Physician Sentenced	Duplicate
10054 - 10054	09/16/92	The Washington Post	Around the Region - Alexandria Physician Indicted	
10055 - 10055	12/20/92	The Washington Post	Va. Doctor Convicted of Felony Drug Charges	
10056 - 10056	02/06/94	The New York Times	Endpaper - Thinking About You	

Library of Congress Documents

Bates #	Date	Periodical	Headline	Comments/Remarks
10057 - 10058	07/30/94	The New York Times	Protestor Is Arrested in Pensacola's 2d Clinic Killing	
10059 - 10060	01/01/95	The New York Times	Doctors' Accounts Vary in Death of Libby Zion	
10061 - 10063	04/30/95	The New York Times	Sermons in Stones	
10064 - 10066	05/21/95	The New York Times	And What's More, Elizabeth Taylor Dyes Her Hair	
10067 - 10069	05/21/95	The New York Times	Court Revisits The Last Days of Doris Duke	
10070 - 10071	08/17/95	The New York Times	Looking at Windows, Darkly	
10672 - 10673	08/17/95	The New York Times	Looking at Windows, Darkly	Duplicate
10072 - 10072	12/19/95	The New York Times	A Preventable Death, With Too Many 'if Onlys'	
10674 - 10674	12/19/95	The New York Times	A Preventable Death, With Too Many 'if Onlys'	Duplicate
10073 - 10073	06/16/96	The New York Times	Migraine? A Doctor Comes Up With Relief	
10675 - 10675	10/22/96	The New York Times	Through Life and Strife, The Tales of a Family	
10074 - 10074	10/30/96	The New York Times	Yet Another Sex Difference Found: Gaining Relief from A Painkiller	
10676 - 10676	11/03/96	The New York Times	The Autumn of the Matriarch	
10677 - 10677	03/02/97	The New York Times	Pill-Popping Deals by Prescription	
10678 - 10679	04/13/97	The New York Times	Painkillers, and Addiction, Are Prevalent Among N.F.L. Players	
10075 - 10075	05/11/97	The New York Times	Roadies - The Speed Queen	
10076 - 10076	02/13/00	The New York Times	Movies: Critics' Choice	
10077 - 10078	03/24/00	The New York Times	New Campus High: Illicit Prescription Drugs	
10079 - 10080	02/09/01	The New York Times	Cancer Painkillers Pose a New Abuse Threat	
10081 - 10082	08/14/01	The New York Times	In Tijuana, A New Kind of Drug Peril	
10083 - 10084	09/09/01	The New York Times	Taking a Chance on TV; Getting the Chance to Play Himself	
10085 - 10088	10/28/01	The New York Times	Overdoses of Painkiller Are Linked to 282 Deaths	2 Copies of the same article
10680 - 10681	10/28/01	The New York Times	Overdoses of Painkiller Are Linked to 282 Deaths	Duplicate
10682 - 10682	11/17/01	The New York Times	Glaxo Sues Endo Over Generic Drug	
10683 - 10683	12/11/01	The New York Times	Front Row	
10684 - 10685	12/30/01	The New York Times	Survivor's Gilt	

Library of Congress Documents

Bates #	Date	Periodical	Headline	Comments/Remarks
10686 - 10686	12/07/02	The New York Times	Actress Sentenced to Probation for Shoplifting	
10687 - 10688	03/08/03	The New York Times	Flying in the Face of Froufrou	
10689 - 10690	11/25/03	The New York Times	The Delicate Balance Of Pain and Addiction	
10691 - 10691	03/27/05	The New York Times	In A Desert, Two Reluctant Travelers Find a Common Path	
10692 - 10693	05/28/05	The New York Times	Restless Charactrs Haunted by the Past and Vistors From Beyond	
10694 - 10697	10/27/05	The New York Times	But Seriously: Jerry Lewis Looks Back and Wonders What Might Have Been	

Attachment 6

MONGABAY.COM

HEALTH | DISEASE | CANCER | MEDICATIONS | SURGERY | VACCINATIONS

Percodan

This page contains recent news articles, when available, and an overview of Percodan but does not offer medical advice. You should contact your physician with regard to any health issues or concerns.

Overview:**Percodan** (when available)

Non 12-step Drug Rehab
Highest sobriety rate by restoring
biochemistry. End drug cravings.
InnerBalanceHealthCenter.com/rehab

Pennsylvania Drug Rehab
Restoring. Healing. Transforming. Let Us Help
You. Call 866-536-7158.
www.PacHills.com

Drug Rehab
Highest Success Rate in the Country Private.
Inpatient Rehab Facility
www.PassagesMaibu.com



Ads by Google

rectifying potassium channels (OP3 and OP1 receptor

Pharmacology and use

Oxycodone, a semisynthetic opiate agonist derived from the opioid alkaloid, thebaine, is similar to other phenanthrene derivatives such as hydrocodone and morphine. Oxycodone is available in combination with aspirin or acetaminophen to control pain and restless leg and Tourette syndromes. For the treatment of diarrhoea, pulmonary oedema; For the relief of moderate to moderately severe pain

Mechanism Of Action:

Oxycodone acts as a weak agonist at OP1, OP2, and OP3 opiate receptors within the central nervous system (CNS). Oxycodone primarily affects OP3 receptors, which are coupled with G-protein receptors and function as modulators, both positive and negative, of synaptic transmission via G-proteins that activate effector proteins. Binding of the opiate stimulates the exchange of GTP for GDP on the G-protein complex. As the effector system is adenylate cyclase and cAMP located at the inner surface of the plasma membrane, opioids decrease intracellular cAMP by inhibiting adenylate cyclase. Subsequently, the release of nociceptive neurotransmitters such as substance P, GABA, dopamine, acetylcholine, and noradrenaline is inhibited. Opioids such as Oxycodone also inhibit the release of vasopressin, somatostatin, insulin, and glucagon. Opioids close N-type voltage-operated calcium channels (OP2-receptor agonist) and open calcium-dependent inwardly

News Articles on Oxycodone

Man arrested for selling OxyContin - **18 Mar 2009**

...release formulations (OxylR, OxyFast) or in combination with other non-narcotic analgesics such as aspirin (Percodan) or acetaminophen (Percocet) Point Pleasant Register

Prescription drug crimes a signal to take notice - **Mar 17, 2009**

One of dozens of pain relievers using the active ingredient oxycodone - Percocet and Percodan are two other prominent ones - OxyContin is commonly Roseville Press Tribune

Inmates recount the nightmare of long-term addiction - **Feb 22, 2009**

... "People take them for different reasons," said Stacy Bjornson, an inmate at the Montana Women's Prison who abused Vicodin and Percodan. Billings Gazette

StandoutStocks.com "Stocks that Standout" picks for today are - **Mar 12, 2009**

Its products include LIDODERM(R), a topical patch to relieve the pain of postherpetic neuralgia, PERCO CET(R) and PERCODAN(R) tablets for the relief of Trading Markets (press release)

UM student arrested in Walgreens robberies - **Mar 5, 2009**

Nania is accused of stealing cash, oxycodone, Ritalin, Percodan and alprazolam. Police also recovered a dark jacket with a light strip, camouflage pants and Montana Kaimin

Marijuana Vs. Morphine Drugs: Comparative Pharmacology - **Mar 2, 2009**

Heroin is about 3 mg, Oxycodone (Percodan) is about 10 mg but Oxycontin is a special long acting form which has caused thousands of deaths when patients Salem-News.Com

Shrooms, jib, love drugs and your kids - **Mar 4, 2009**

This is followed by cannabis, at 26 per cent, and the non-medical use of opioid pain relievers such as codeine, Percocet, Percodan and Tylenol 3, CBC.ca

Endo Pharmaceuticals Announces Extension of its Tender Offer for - **Mar 2, 2009**

Its products include LIDODERM(R), a topical patch to relieve the pain of postherpetic neuralgia, PERCO CET(R) and PERCODAN(R) tablets for the relief of PR Newswire (press release)

Endo Licenses Novel Pain Therapy from Grunenthal - **Feb 27, 2009**

Its products include LIDODERM(R), a topical patch to relieve the pain of postherpetic neuralgia, PERCO CET(R) and PERCODAN(R) tablets for the relief of PR Newswire (press release)

Lawmakers sniff out pros, cons of medical cannabis bill at Capitol - **Feb 21, 2009**

Sickney said medical marijuana allows his patients to avoid taking addictive prescription medications such as Percodan or Oxycontin. Great Falls Tribune

Endo and Penwest settle litigation with Actavis - **Feb 25, 2009**

Its products include Lidoderm, Percocet and Percodan, Frova, Opana, and Voltaren gel. The company markets its pharmaceutical products to physicians in pain Pharmaceutical Business Review

Endo and Penwest Announce Settlement of Opana(R) ER Litigation - **Feb 20, 2009**

Its products include LIDODERM(R), a topical patch to relieve the pain of postherpetic neuralgia, PERCO CET(R) and PERCODAN(R) tablets for the relief of PR Newswire (press release)

State has no money to track prescription flow - **Jan 18, 2009**

That includes controlled substances such as oxycodone — the active ingredient in OxyContin, Percocet and Percodan — and benzo-diazepines such as Xanax and The Olympian,

011141

Drug bust at Petrolia business - **Jan 26, 2009**

Police exercised a warrant on a Railroad Street business last Thursday and seized a quantity of marijuana and several packages of percodan tablets along Bayshore Broadcasting News Centre.

Collective agreement reached - **Jan 24, 2009**

Officers with the OPP drug and canine units seized suspected marihuana, eight percodan tablets, cash and suspected drug paraphernalia. Sarnia Observer.

Richard Dreyfuss: Out of the wreckage - **Jan 30, 2009**

The shame of the police finding cocaine and Percodan tablets in the wreckage drove him to rehab. Of course, it was more complicated than that, Independent.

Endo Pharmaceuticals and Alexza Pharmaceuticals Conclude Research - **Jan 29, 2009**

Its products include LIDODERM(R), a topical patch to relieve the pain of postherpetic neuralgia, PERCO CET(R) and PERCODAN(R) tablets for the relief of PR Newswire (press release).

Endo Pharmaceuticals to Announce Fourth Quarter and 2008 Full-Year - **Jan 28, 2009**

Its products include LIDODERM(R), a topical patch to relieve the pain of postherpetic neuralgia, PERCO CET(R) and PERCODAN(R) tablets for the relief of PR Newswire (press release).

Police: Prescription drug abuse increasingly common - **Jan 22, 2009**

Sells also offered the following advice to parents: hide your prescription drugs, particularly opium-based painkillers, such as Oxycodone, Percodan and Del Mar Times

Doc Hollywood - **Jan 24, 2009**

Twenty-five years ago, when Elizabeth Taylor checked herself into the Betty Ford Center, seeking treatment for an addiction to Percodan and alcohol, guardian.co.uk

Is your teenager using prescription drugs behind your back? - **Jan 23, 2009**

Examples include Vicodin, OxyContin and Percodan. Closely following sales figures for opiate panels are those for benzodiazepines and buprenorphine. Free press releases (press release).

The 12 days of Christmas - **25 Dec 2008**

This year's latest — 12 days of free downloads and 12 hits of drugs to share (sing "... five Percodan") — are another reflection of the ungainly dance between CBC.ca

Drug Addiction: Toll On Family During the Holidays - **Nov 30, 2008**

..."Take prescription opioids, such as OxyContin, Percocet, Percodan, and others, there are approximately 15 million people abusing these drugs in the United TransWorldNews (press release).

Bam Jones: How an alleged serial killer from Florida came to Bartlett - **Dec 6, 2008**

Jones and the boy each took a Percodan, a narcotic painkiller, and Jones then led the boy to an abandoned apartment building where he said his girlfriend DeSoto Appeal.

Opioid addiction subject of film screening, panel discussion - **Dec 3, 2008**

Examples of opioids produced by pharmaceutical companies include Percodan/Percocet and Demerol. CAMH says the increased prevalence of opioids is leading to Burlington Post.

How Do Stars Keep Up With Their Joneses? - **Nov 18, 2008**

...a former Sports Illustrated model who is now working with Dr. Drew Pinsky to fight an addiction to Vicodin, Percodan and other pills. E! Online

Prescription Drug Addiction - OxyContin - **Nov 20, 2008**

...or 5 mg immediate-release capsules (OxyIR®), or in combination products with aspirin (Percodan®) or acetaminophen (Percocet®) for the relief of pain. TransWorldNews (press release).

Premium Company Profile - Endo Pharmaceuticals - New Research - **Nov 14, 2008**

The company has a portfolio of branded products that includes: Lidoderm, Percocet, Frova, Percodan, Opana, Opana ER and Synera. The company's lead product Live-PR.com (Pressemittelung).

Teen Pleads Guilty In Drug Case - **Nov 17, 2008**

...knew he was purchasing pills containing oxycodone, an opioid pain reliever found in such prescription medications as Percocet, Percodan and Oxycontin. Harrisonburg Daily News Record.

Dangerous Drugs: Dead Patients - **Nov 18, 2008**

The Opiates: Oxycontin, MSContin (morphine) & Percodan, et similia: 7. Tobacco (it acts like a drug and kills 100 thousand per year) 15. Salem-News.Com.

Back from addiction - **Nov 16, 2008**

Soon, the New Jersey native found himself each day ingesting a cocktail of painkillers including everything from Vicodin and Valium to Percodan and Percocet The News Journal.

Prescription Drugs in Schools - **Nov 18, 2008**

...eight percent of 12 to 17-year-olds have abused a pain killer. Common brand names include Lorcet, Lortab, Oxycontin, Percocet, Percodan, Tylox and Vicodin. KWCH.

How Many Tablets in the Bottle ? | The Life of a Hotel Doctor | By - **Nov 11, 2008**

Ironically, narcotics (the class that includes Vicodin, Percodan, heroin, Oxycontin, and morphine) are safer than the other class of pain remedies. Hospitality Net

Adieu, Rimonabant - **Nov 3, 2008**

...and physical therapists, and prescribed Celebrex, Flexeril, Soma, Valium, Vicodin, Percodan, Percocet, Darvocet, Ultram, ibuprofen, naproxen, etc CounterPunch.

A Year of Stolen Light - **Nov 3, 2008**

She might suggest a lover's reaction of distaste to the unshowered vagabond who just serviced a filthy bum for his Percodan. A keen eye could point out the Variety.

Kolkata Watch - XVI : Drug abuse and its medical implications - **Oct 27, 2008**

Other opioid drugs include morphine, Oxy Contin, Vicodin, and Percodan, which have legitimate medical uses, however, their nonmedical use or abuse can KangaOnline.

Clooney's aunt made him stay away from drugs - **Oct 20, 2008**

..."My father had a difficult time for years when she was addicted to Percodan. My aunt's addiction haunted me when I injured my back," Contactmusic quoted Oneindia.

Clooney: 'My aunt kept me from drugs' - **Oct 18, 2008**

..."My father had a difficult time for years when she was addicted to Percodan," he said. "My aunt's addiction haunted me when I injured my back. Digital Spy.

WINEHOUSE BLAMES CRACK ADDICTION ON LSD HALLUCINATIONS - **Oct 17, 2008**

..."I'd done Darvon, Lortab, methadone, morphine, Percodan, some Phenaphen with Codeine, Talacen, Tramadol, lots of Tylenol, some Ultram, but never all at the Daily Mash (satire).

GEORGE CLOONEY - CLOONEY BESIEGED AFTER PITT MARRIAGE RUMOUR - **Oct 17, 2008**

Hollywood actor George Clooney is heading to the wild west - he's reportedly set to star as THE LONE RANGER. The Oscar winner will join Johnny Depp in the Contactmusic.com.

I'm a loser in love, admits Hollywood star George Clooney - **Oct 17, 2008**

He said: "My father had a difficult time for years when she was addicted to Percodan. "My aunt's addiction haunted me when I injured my back. Glasgow Daily Record.

Methadone Clinic in Monterey On Hold - **Oct 13, 2008**

...addicted to prescription drugs such as Codeine, Dilaudid, Heroin, Hydrocodone, Lortab, Lorcet, Percocet, Percodan, Morphine, Oxycodone, and Oxycotin, UC Daily News.

Former County Employee Pleads Guilty to Drug Charges - **Oct 7, 2008**

In one message, Stevens allegedly told Kodi Ferguson to save a Percodan for him because he might as well get addicted to those, too. Bartlesville Examiner Enterprise.

St. Albans fights OxyContin abuse - **Oct 6, 2008**

...the poster asks, listing OxyContin, heroin, Percodan and Dilaudid as the addictive opiates. In smaller print, the poster says the University of Vermont is BurlingtonFreePress.com.

Paging Dr. Alan Frischer - **Sep 25, 2008**

...marijuana, heroin, alprazolam (Xanax), hydrocodone (Vicodin), oxycodone (OxyContin, Percocet, Percodan, Tylox), methadone, clonazepam (Klonopin), Downey Patriot.

Lawson pleads guilty to drug conspiracy - **Sep 25, 2008**

...link all three to the same conspiracy and say they used "fraud, forgery, deception or subterfuge" to obtain Percodan, OxyContin and Percocet Cincinnati.com.

Teen Prescription Drug Use Increasing - **Sep 10, 2008**

Abusing drugs such as Vicodin, OxyContin and Percodan is more common with teens, with one report discovering that 13 percent of high school seniors had used RedOrbit

A month for turning clean and sober - **Sep 8, 2008**

Prescription drugs, like Percodan, Percocet, Oxycontin and other pain medications are becoming more prevalent in the drug scene. Gloucester County Times - NJ.com.

Abuse: dependence common in teen painkiller users - **Sep 9, 2008**

Abuse of drugs like Vicodin, OxyContin and Percodan is becoming increasingly common among adolescents, the researchers point out, with one study finding Reuters UK.

Abuso y adicción, frecuentes en consumidores de analgésicos EEUU - **Sep 10, 2008**

Abusar del consumo de fármacos como Vicodin, OxyContin y Percodan es cada vez más frecuente entre los adolescentes, indicó el equipo. Buena Salud

I decided not to go on R&R - **Aug 19, 2008**

Bill had one other memorable feature — he took apart Percodan tablets and kept the barbiturate part for himself. Bill didn't talk much, just kind of floated Fergus Falls Daily Journal.

Collegium Collects \$20 Million in Venture Round, Led by Frazier - **Jul 15, 2008**

...oxycodone (the active ingredient in OxyContin, Percodan, and other often-abused drugs) that is harder to tamper with and more difficult to abuse Xconomy.

Seabrook board denies methadone clinic plan - **Aug 8, 2008**

...providing medication-assisted treatment to persons addicted to the opiate/opioid class of drugs including heroin, Dilaudid, Percodan, Percocet, York Weekly.

Prescription drug abuse more than kids getting high - **Jul 30, 2008**

These are led by OxyContin and then the Percodan, Percocet and then followed up by Vicodin and all the hydrocodone generics. A lot is said in this field Reuters

Training needed on drug to reverse heroin overdose - **Jul 24, 2008**

They will get a primer on opioids, with a list, that includes morphine, codeine, Percodan, Percocet, Vicodin, Dilaudid. And, of course, heroin. Newsday.

'Drinking' a fine comic cocktail - **Aug 1, 2008**

Carrie's 12-year relationship to singer Paul Simon gets some time, along with her addiction to Percodan, codeine and other narcotics. Redwood City Daily News.

Semi-Synthetic Narcotics Facts - **Jul 19, 2008**

...or 5 mg immediate-release capsules (OxyIR®), or in combination products with aspirin (Percodan®) or acetaminophen (Percocet®) for the relief of pain. TransWorldNews (press release).

Acura' Acurox' A Revenue Deterrent Formulation of Oxycodone - **Jul 23, 2008**

...release formulations (Roxicodone and generics), or in combination with nonnarcotic analgesics such as aspirin (Percodan) or acetaminophen (Percocet). Seeking Alpha.

In Canada c'è già chi vuole adottarlo - **Jul 25, 2008**

«Mi sono imbattuta in così tante vicende umane terribili», inizia prima di raccontare la storia di una donna dipendente da Percodan che, dopo aver saputo di Corriere Canadese.

2008-07-02 20 11 18 - www.companiesandmarkets.com adds new report - **Jul 2, 2008**

The company has a portfolio of branded products that includes: Lidoderm, Percocet, Frova, Percodan, Opana, Opana ER and Synera. The company's lead product PR-Inside.com (Pressemitteilung).

Back woes couldn't set Bill Walton back long - **Jun 5, 2008**

I'd wake up at 5 in the morning and reach for the Percodan. ? Walton says his back and hip had been bothering him. He didn't know what it was. San Diego Union Tribune.

Concerns over meth clinic in Seabrook - **Jul 1, 2008**

...providing medication-assisted treatment to persons addicted to the opiate/opioid class of drugs including heroin, Dilaudid, Percodan, Percocet, Portsmouth Herald News.

Police: Robber at Tamaqua pharmacy sought narcotic - **Jun 30, 2008**

Police did not indicate the brand of pills, but oxycodone is found in OxyContin, Percocet, Percodan and Tylox. Oxycodone, especially in OxyContin. Allentown Morning Call.

Ode to Recovery - **Jun 29, 2008**

Percodan, probably Percocet. I tried things I didn't know the names of," he says. He lasted two years before he was forced to leave school and go back to RedOrbit.

Police: Robber at Tamaqua pharmacy sought narcotic - **Jun 27, 2008**

The news release did not indicate the brand of pills, but oxycodone is found in OxyContin, Percocet, Percodan and Tylox. Oxycodone, especially in the form Allentown Morning Call.

Tamper-proof Medicaid Prescriptions: More Fog from Washington ? by - **Jun 8, 2008**

These "Schedule II" ? drugs are narcotic, stimulant, and depressant drugs like morphine, Percodan, Ritalin, and Dexedrine, medications with legitimate medical WBUR.

Laconia anticipates with caution a proposed methadone clinic - **Jun 7, 2008**

Concord and Manchester — which are designed "for persons addicted to opiate/opioid class of drugs (Heroin, Dilaudid, Percodan, Percocet, Propoxyphene, Laconia Citizen.

Portrait: An Odyssey Concludes - **May 10, 2008**

I was shocked to find the medicine cabinet loaded with prescription bottles - valium, percodan, quaaludes, and others I'd never heard of. Tampa Tribune.

Opiate addiction: Help is available - **May 14, 2008**

Such synthetic derivatives include hydrocodone (Vicodin), oxycodone (Percodan, OxyContin), hydromorphone (Dila-udid), and heroin (diacetylmorphine), Suburban Lifestyles.

Jackson girl's death ruled suicide - **May 7, 2008**

Mikayla Hull of Windy Hill Circle NW was killed by an overdose of the painkiller Oxycodone, a generic form of OxyContin and Percodan, said Rick Walters, Canton Repository (subscription).

Celtics learning that Pistons' resiliency is unmatched - **May 23, 2008**

Well, either Billups is a quick healer or he discovered the miracle of Percodan. He was like a different player. He had 19 points, seven assists and made CBS News.

Brand Names/Synonyms:

Percodan is also known by the following brand names and/or synonyms Codeinone, Dihydrohydroxy-, Combunox, Dea No. 9143; Dihydrohydroxycodeinone, Dihydrohydroxycodeinone; Dihydrone; Dihydroxycodeinone; Dinarkon; Diphidrone, ENDOCET, ENDODAN; Endone; Eubine; Eubine (France); Eucodal, Eucodalum; Eukodal; Eutagen; HSDB 3142; Ossicodone [Dcit] Oxanest, Oxiconona [Inn-Spanish]; Oxicon; Oxiconone; Oxikon, Oxycet, Oxycodone; Oxycodon; Oxycodone, Oxycodone Hcl; Oxycodone Hydrochloride; Oxycodone [Usan; Ban; Inn], Oxycodonum [Inn-Latin], Oxycon, Oxycontin, PERCOCET; Pancodine; Percobarb; Percocet; Percodan; Roxicet; Roxicodone; Roxilox; Suspendol [Canada]; Tecodin; Tekodin; Thecodine; Thekodin; Tylox

Drug Category:

Percodan is categorized under the following by the FDA: Narcotics, Antitussives, Analgesics, Opioid, Opiate Agonists, ATC N02AA05

Dosage Forms:

Tablet, Suppository

Absorption:

well absorbed from OxyContin tablets with an oral bioavailability of 60% to 87%.

Interactions:

Interactions for Oxycodone:

The CNS depressant effects of oxycodone hydrochloride may be additive with that of other CNS depressants.

Chemical IUPAC Name:

4, 5-epoxy-14-hydroxy-3-methoxy-17-methylmorphinan-6-one

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Clooney's aunt made him stay away from drugs

Monday, October 20, 2008, 15:54 [IST]



Washington, (ANI): Hollywood actor George Clooney has credited his aunt for keeping him away from drugs. The Ocean's Eleven star was offered painkiller Vicodin by doctors after hurting his back filming the 2005 oil industry drama Syriana.

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However, he declined to the offer because he had seen Rosemary's career plummet after she became hooked on prescription drugs. "My father had a difficult time for years when she was addicted to Percodan. My aunt's addiction haunted me when I injured my back," Contactmusic quoted Clooney, as saying.

"The doctors gave me a tub of Vicodin, but I didn't take any. I thought, "This is a bad time to decide to be a drug addict". It's all timing - when I'm 80, I'm all for being a drug addict, but not now," he added.

Tags: george clooney, oceans eleven, syriana.

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Rosemary's son



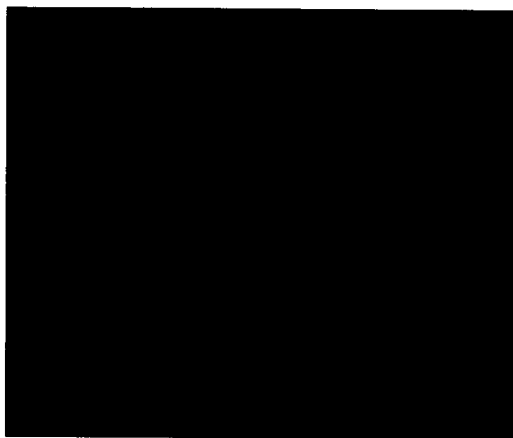
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By: diane On: 20 Oct 2008 11:15 pm

This makes me laugh ?! I remember reading a Clooney quote saying he " had done too many drugs and slept with too many woman " when asked about politics . Is He now sleaing up his pastin time to become a candidate ?

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Seabrook board denies methadone clinic plan

Ruling bans drug application

By **Susan Morse**
 smorse@seacoastonline.com
 August 08, 2008 6:00 AM

SEABROOK — The Planning Board on Tuesday, Aug. 5, approved a methadone clinic on Stard Road as long as treatment does not include methadone.

The decision effectively denies Colonial Management Group LP's bid to open a methadone clinic at its proposed location. The board voted against the clinic under Article 9 for site plan review that states detrimental effects should be minimized, including traffic congestion, traffic hazards and annoyance to other landowners.

The board voted 6-1 in favor of a motion by Vice Chairman Peter Evans that the building meets site plan review, but use of methadone is considered a detriment to abutters and a traffic hazard to the town.

"Therefore," said Evans in his motion, "approve the site plan as long as methadone is not dispensed on the premises."

Only board member Keith Sanborn voted against the motion, and that was, he said, because he thought the clinic shouldn't be there at all.

Colonial Management Group of Manchester proposed building a clinic at 18 Stard Road, a use allowed in the industrial zone. Director of Development Joseph Sullivan had no comment after the vote whether the group would appeal the Planning Board's decision.

Property owner King Weinstein said he would not appeal.

Two people who spoke Tuesday said they knew firsthand the effects of methadone.

"I was on morphine for nine years," said Roland Fowler, a former Seabrook police officer. "They put me on methadone to help with withdrawals ... which made me flip out. ... We need to get kids off of drugs (but not with other drugs)"

Seabrook would be responsible for accidents caused by people driving under the influence of methadone, he said.

"... You might as well open up a marijuana shop up the road," Fowler said.

Charlotte Sturgis, of Washington Street, said her husband went to a methadone clinic for pain and got into a serious motor-vehicle accident due to the drug.

"I'm living proof right here. Methadone makes you stupid, tired," she said. "... You're going to kill somebody."

For months, abutters have spoken against the clinic that would be located near the Pineo Farms residential neighborhood, the Cimarron Apartments and the Best Western. The motel has a petting zoo that attracts children, said Selectman Robert Moore, the board's representative to the Planning Board.

Attorney Craig Salomon, who is also a North Hampton selectman, represented Best Western and Cimarron Apartments in the planning review process. The applicant is a limited partnership, Salomon said, which should raise a red flag that the people putting money into the clinic are, "trying to hedge their bets."

Impaired drivers add to the traffic hazard, he said. School buses pick up children on Stard Road and at the Cimarron Apartments.

An engineer for the building said for Salomon to say people who go the clinic are different than those who go into the motel is, "bizarre."

Town Planner Tom Morgan said in three years, there has been no problems at a clinic in Newington, but he had heard of problems in Maine.

Board Chairwoman Susan Foote said, she was playing devil's advocate but, "We're possibly condemning things that have not happened."

Evans said he researched Federal Drug Administration Web sites on side effects of methadone and got two different opinions on whether the drug "was an angel sent to help pull people out of the depths," or the opposite.

Web sites gave common side effects as drowsiness, feeling faint and dizziness, he said.

"Believe me, we are very good at what we do," Sullivan said. "We don't want a problem ... we understand your fears. We're here to bring treatment to a community that needs treatment."

Sullivan said people's concerns were found to be unwarranted a year later when Colonial Management Group had opened clinics in other areas.

Medical Supervisor Donna Higgins said the drug is prescribed at low doses, by a doctor.

"When you give them methadone as prescribed, they are not impaired," she said.

She told those in the audience, when their child needs help, he or she will have to drive to Manchester or elsewhere to get it.

The clinic proposed treating substance abuse on an outpatient basis, providing medication-assisted treatment

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Back woes couldn't set Bill Walton back long



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June 5, 2008



For many, many years, talking has not been Bill Walton's problem. He's James Stewart in "Mr. Smith Goes to Washington," only taller, a 6-foot-11 filibuster. An interview with him generally begins with Walton talking for 10 or 15 minutes before you've asked the first question.

Now, walking has been another matter. The former NBA, UCLA and Helix High basketball star has had so many problems with his lower extremities he may have coined a phrase: "The only minor surgery is surgery performed on somebody else." If he didn't, he's certainly used it enough.

On Feb. 25, the ESPN analyst tried to ease himself out of a seat as he was about to exit a plane after a cross-country flight.

"I went to the ground," says Walton, granting his first extensive newspaper interview since the incident. "I had extensive nerve pain. Even into recovery, I was having unbelievable, radiating nerve pain. I'd wake up at 5 in the morning and reach for the Percodan."

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Walton says his back and hip had been bothering him. He didn't know what it was. Turns out: "I had bulging discs, a narrowing of the spine and all the muscles, ligaments and tendons in the hip were not functioning."

So Walton was limited to being a rather large couch potato with two eyes, watching his beloved game on television, rather than in person. Talk about pain.

But there's one thing about Walton: When he sets his remarkable mind on doing something, it gets done. Just as he overcame his speech problem as a young man, he set out to ease the pain and make his body right.

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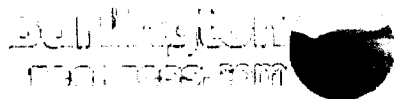
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The Burlington Free Press

St. Albans fights OxyContin abuse

BY SAM HEMINGWAY • FREE PRESS • OCTOBER 5, 2008

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ST. ALBANS — An orange-colored poster on a wall at the HowardCenter's drug counseling clinic on Fairfield Street shouts the word "Opiates" in big black letters.

"Do you need help breaking the habit?" the poster asks, listing OxyContin, heroin, Percodan and Dilaudid as the addictive opiates.

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Forum: What is your reaction to the issues related to OxyContin addiction?

In smaller print, the poster says the University of Vermont is offering "free, confidential, outpatient adult opiate treatment" as part of a research project.

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EMILY NELSON, Free Press

State Trooper Geneva Cushman returns to her cruiser after completing a traffic stop on Thursday, Sept. 26, 2008. Thirty local, county, state and federal law enforcement officers conducted a motor vehicle enforcement detail as part of their work to reduce crime and traffic hazards in the St. Albans area.

WHERE TO GET HELP

FRANKLIN COUNTY:

- For people over age 18, the HowardCenter, 524-7265.
- For people under age 18, the Northwestern Counseling and Support Services, 524-6554 or toll-free, 1-800-834-7793.

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Opioid addiction subject of film screening, panel discussion

News

Dec 03, 2008

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Addiction to prescription opioids and the effectiveness of medication treatment is the focus of an upcoming film screening and panel discussion.

The Centre for Addiction and Mental Health (CAMH) in partnership with the Centre for Prevention of Addictions is presenting a film and panel discussion about addiction to prescription opioids and the sequential method of treatment.

The free screening and panel discussion will take place on Tuesday, Dec. 2, 7 p.m. at the Grandgarden Theatre, 100 Lakeshore Blvd. E.

Panelists will include the director/producers of the documentary as well as a panel of methadone users and a family member of a person with an opioid dependence.

The CAMH says the use of prescription opioids is on the rise in our society, among adults and teenagers. CAMH notes that its biennial non-sponsor's survey found that Ontario students reported the highest use of Oxycontin, a strong prescription painkiller, in the last two years surveyed, and that many of them were obtaining the opioids from their parents' medicine cabinet.

The CAMH website says opioids are a family of drugs that have both pain-killing effects. Their primary use is to relieve pain but they can also include control of coughs, diarrhea and the treatment of drug addiction in addicts.

Federal laws regulate the possession and distribution of opioids.

Some opioids, such as morphine and codeine, are made from the opium plant, a highly addictive substance collected from the seed pods of the opium poppy plant and used in southern Asia. Other opioids, such as heroin, are made by adding a chemical to morphine. Many tablets of the drug, which do not come from opium but instead are made synthetically in a laboratory. Examples of such drugs produced by chemical means include the drugs Percodan, Percocet and Demerol.

CAMH says the increased prevalence of addiction is a result of the high level of dependence.

The treatment of addiction to opioids has been a challenge, with high relapse rates, however recent evidence has shown that a combination of treatment with prescription opioids. For example, data on admissions to addiction treatment programs shows that only two per cent of people who previously used heroin when 15 per cent had previously used drugs, according to a CAMH press release.

Prescription for addiction by award-winning filmmaker, will also examine the problem of opioid dependence and the role of medication treatment from multiple perspectives. It can help individuals with addiction to opioids due to chronic pain, front-line health care professionals, patients, family and friends, and support services to help them find ways to help them through withdrawal and relapse.

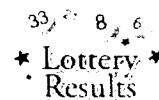


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By Dale Welch, Hilltop Express

Story Published: Oct 13, 2008 at 11:23 PM CDT
Story Updated: Oct 14, 2008 at 5:57 PM CDT

An application for a proposed methadone clinic to be located just outside Monterey town limits has been put on hold for a second time because of a technicality.

A public hearing that had been scheduled for Sept. 16 at Monterey High School and a hearing in Nashville, that had been set for late October has also been put on hold.

"The public hearing has been delayed," Melanie Hill, Executive Director of Health Services and Development Agency, said, "because it is expected that Private Clinic Monterey will withdraw its application. It will be rescheduled if the application is re-filed."

But that action is not keeping the Putnam and Cumberland County Commissions and other governments from voicing strong opposition to the proposed clinic.

A resolution on the agendas of both county commissions says that methadone is "a synthetic opioid which produces many of the same effects in drug addicts as morphine and heroin" and is "increasingly being abused by drug users for recreation and is causing an alarming increase in overdoses and deaths"; and "contrary to popular belief, methadone is a highly addictive drug, which could easily end up on the streets of Putnam County and other areas in the Upper Cumberland"; and "the probability of any positive affects to the health care system, economy or recovering drug users in our area is unlikely"; and "there are already several drug treatment facilities available for the citizens of Putnam County and the Upper Cumberland area which include Bradford Heath, Cumberland Plateau Recovery, Recovery Living, Med Solutions and Volunteer Behavioral Health,"; and "because these facilities are already established and available to the citizens of Putnam County and the Upper Cumberland Area, there is not a need for a methadone clinic."

Owners of the methadone clinic, called Private Clinic Monterey, plan to build the approximate \$970,000 facility at 16168 Crossville Highway.

The address is near Walker Farms Rd. The purpose of the clinic is

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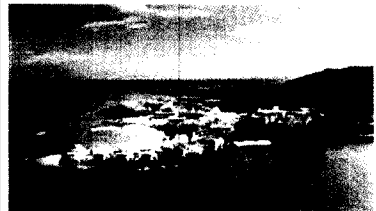
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to "assist opioid addicted patients to abstain from the use of illicit drugs through detoxification, treatment and substance abuse/psychiatric counseling services.

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It is a private for profit outpatient clinic without state, federal or local funding." It will serve the adult population in Putnam County and surrounding counties.

J. Paul Connell, CEO of the proposed clinic, told the Hilltop Express in a story that ran in the May 15, 2008 edition, that his clinic Private Clinic North, in Rossville, GA., already treats around 228 patients from Putnam and surrounding counties.

"We treat everyone from minimum wage earners to doctors and lawyers," he said. The majority of Private Clinic patients have gotten addicted to prescription drugs such as: Codeine, Dilaudid, Heroin, Hydrocodone, Lortab, Lorcet, Percocet, Percodan, Morphine, Oxycodone, and Oxycotin.

Connell said, "Its a treatment, not a cure. Its much like insulin is a treatment for diabetes; or eyeglasses for bad eyes. They don't cure, but they help "

"With the cost of gasoline going up," Connell said, "its getting to where the cost of transportation for those patients are more than the cost of the treatment. If we can get up there into the Monterey community, it would be easier for our patients." Connell said that he has already bought a home in the area for his family.

Property records show that Connell Properties bought the 7.83 acres where the Methadone clinic is planned over a year ago, in May, 2007.

Connell told the Hilltop Express, "I thought about it and prayed about it. Now, its time to build it." He said that while doctors and nurses will mostly come from the present clinics, others could be hired locally. He said the payroll for the clinic would be from \$1.3 to \$1.6 million. More information about what the clinic offers can be found on the Internet at: www.privateclinicnorth.com.

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How Many Tablets in the Bottle...? | The Life of a Hotel Doctor | By Mike Oppenheim, M.D.

If you Google the appropriate terms, including the year 2003, you'll find a story about a Los Angeles doctor who had trouble with the California Medical Board over his generosity in prescribing drugs to well-known actresses. It's probably safe to name him, but two months ago I named another doctor, someone I liked and who often asked me to cover some very nice hotels. The column mentioned a few quirks but in friendly tone, a foolish mistake. Every writer knows that, aside from public figures, people who see their names in print are always outraged unless the contents are entirely flattering. He was outraged. He hasn't spoken to me since.



A hotel guest who wants a Demerol injection or Oxycontin pills must behave more or less like someone in pain. If he becomes too demanding, reckless, or unpleasant about paying, even a generous doctor might wash his hand of him. Referring a disagreeable patient to another doctor is considered bad manners, but every concierge knew my number, so I heard from complainers, and these grew to a tiresome chorus as this doctor's reputation spread.

"Incredible! You answered the phone! I never called a doctor who answered the phone himself!"

"I'm one of the few."

"The concierge gave me your number. Janice. It's a weird situation, but I swear it's the truth, and I need your help. Desperately."

Another drug abuser. Not all called after midnight but a fair number did. While this is an invented scenario, you have my word that I've engaged in identical dialogues dozens of times.

"I came back to the room, and my medication was gone. The maid threw it out when she cleaned. Can you help me?"

"What was your medication?" Guests often called for missing prescriptions, but there was no chance this gentleman needed penicillin or heart pills.

"Vicodin. I've had four back operations."

"And how many tablets in the bottle?"

"Almost two hundred. That's how many my doctor gives."

My wife disliked being awakened, but she kept quiet if it sounded like the caller was in genuine distress. Long experience hearing 'and how many tablets...' persuaded her this was not one of those cases, and she began suggesting I get off the phone.

"I swear it's true. I've had four back operations, and I'm in constant pain. I have meetings all week, and I can't function without medication."

"That's a lot of Vicodin."

"Check me out. I'll show you the scars. I need your help. Please."

A combination of hydrocodone and Tylenol (Vicodin, Lortab) may be the most popular prescription drug in the US. Ironically, narcotics (the class that includes Vicodin, Percodan, heroin, Oxycontin, and morphine) are safer than the other class of pain remedies, the nonsteroidal anti-inflammatories (Advil, Motrin, Naproxen, aspirin) because they don't cause GI bleeding. But they are addictive in people inclined to addiction.

The world is not divided into addicts and normal people. Plenty of individuals take more drugs than they should and for the wrong reasons but continue to lead productive lives, although it depends on the drug. You can't do this with speed.

Speed drugs like amphetamines and cocaine poison tissues, the brain most of

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State has no money to track prescription flow

By Jeremy Pawloski | The Olympian - Published January 18, 2010

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In 2007, the state Legislature voted to create a database that would help doctors and law enforcement agencies track prescriptions for controlled substances issued to anyone in the state.



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The program was designed to curb abuse of controlled substances — such as OxyContin — that are legally prescribed.

However, no money was allocated for the program and it was never implemented.

Steven Saxe, director of health professions and facilities for the state Department of Public Health, said the database would allow doctors to determine whether a patient was "doctor shopping" — obtaining controlled substances from multiple prescribers.

The program was aimed at curbing abuse of all controlled substances that are legally prescribed. That includes controlled substances such as oxycodone — the active ingredient in OxyContin; Percocet and Percodan — and benzo-diazepines

such as Xanax and Valium, both anti-anxiety drugs.

The legislation authorizing the drug-monitoring program required that the database provide dispensers of prescriptions with "real time" information on a patient's prescription history.

Information in the database would be available to law enforcement officers and prosecutors, provided that they were "engaged in a bona fide specific investigation involving a designated person," according to the bill.

No money has been allocated to create the database, and Gov. Chris Gregoire did not provide funding for it in her draft budget for 2009. Saxe said.

Saxe said the prescription monitoring program approved for Washington was similar to ones already in place in Kentucky, Idaho, Nevada and Maine. According to data from the state Department of Health, 29 states have operational prescription monitoring programs.

Saxe conceded that finding the \$680,000 it would cost to develop the database would be difficult, given that the state faces a budget shortfall of at least \$5.7 billion in the next two years.

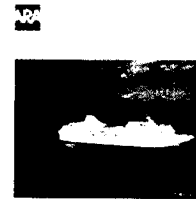
Lt. Loreli Thompson, Thurston County's drug task force commander, said such a database would help law enforcement officers track the illegal diversion of controlled substances that are prescribed by physicians but widely abused.

"I'd really like to see something like that," Thompson said. "With the issues we're having with addiction and abuse of prescription pills, it seems like that would be a worthwhile project."

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THE TRIBUNE

Lawmakers sniff out pros, cons of medical cannabis bill at Capitol

BY JOHN S. ADAMS TRIBUNE CAPITOL BUREAU • FEBRUARY 21, 2009

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HELENA — Visitors to the state Capitol on Friday couldn't help but notice the peculiar odor wafting throughout the building — and it wasn't the cafeteria's special of meatloaf.

In an unprecedented show of support for medical marijuana, patients and caregivers put five live, flowering and very odiferous cannabis plants on display in the second floor rotunda.

The plants, along with volumes of material on the benefits of what patients and caregivers call a natural "wonder drug," were part of an all-day event dubbed "Cannabis at the Capitol."

The event, sponsored by Patients and Families United, featured free brownies, several speakers and plenty of information on medical marijuana, so far one of the most buzzworthy issues of the 2009 Legislature.

The Senate is scheduled to vote on a measure today that would increase the amount of medical marijuana patients could possess and expand the list of ailments that qualify for marijuana treatment.

Edwin Stickney is a physician from Billings who first recommended medical marijuana for a young female patient suffering from Chiar's Syndrome, a genetic condition in which the base of the skull presses on the brain, causing chronic fatigue. Addressing a crowd of more than 100 supporters and curious onlookers, Stickney said he has seen medical marijuana turn around his patients' lives.

"Since then, I have had about 60 and 70 patients come to me," Stickney said. "They are not druggies ... for the most part they suffer from chronic pain."

Stickney said medical marijuana allows his patients to avoid taking addictive prescription medications such as Percodan or Oxycotin.

"They have been able to replace (their painkillers) with medical marijuana ... and their quality of life improves," Stickney said.

Not everyone was supportive of Friday's rally.

Rep. Tom McGillvray, R-Billings, told the Bozeman Chronicle that he was furious over the cannabis rally. According to House Majority Leader

Margarett Campbell, D-Poplar, McGillvray wanted security guards to remove the marijuana plants from the rotunda but was told the display was legal under Montana law.

"You don't get to pick and choose which events are covered under the First Amendment," Campbell said.

Reach Tribune Capitol Bureau Chief John S. Adams at 442-9493, or jadams@greatfallstribune.com.



Rep. Edward Butcher, R-Winifred, talks with Chris Williams, a volunteer and caregiver to terminally ill patients, during a medical marijuana rally held in the Capitol rotunda Friday. The plants were on display as part of "Cannabis at the Capitol," put on by supporters of a medical marijuana bill on which legislators will vote today.

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Inmates recount the nightmare of long-term addiction
'You have to have had enough,' to kick painkiller habit, 1 says

By **DIANE COCHRAN**
Of The Gazette Staff

Imagine a world where everything is just a notch better than it is here.

Colors are bolder. Jokes are funnier. Work is easier. All of it is a cut above and, frankly, rather delightful.

That's what being high on prescription painkillers is like for some people.

"People take them for different reasons," said Stacy Bjornson, an inmate at the Montana Women's Prison who abused Vicodin and Percodan. "For me, they made me happy. I didn't have to think about anything. The grass was greener. The sky was bluer."

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Teen Pleads Guilty In Drug Case

Ex-HHS Football Player Sold Pills To Teammates

By Pete DeLea

HARRISONBURG - A former Harrisonburg High School football player accused of selling prescription painkillers to teammates before games pleaded guilty Monday in Rockingham County Circuit Court.

Ronnell Brandon, 18, of Harrisonburg, pleaded guilty to nine felony counts of selling drugs on or near school property, three felony counts of distributing a controlled substance and one felony larceny count stemming from an unrelated robbery.

Brandon, who faces 185 years in prison, is scheduled to be sentenced on Feb. 25.

The Robbery

The initial investigation started following what prosecutors called a "mock robbery" in late October 2007 that took place at the University Place apartments in Harrisonburg.

Assistant Commonwealth's Attorney Louis Nagy said that Brandon, along with the commonwealth's witness, Alex Owah, organized the "mock robbery" against one of their friends, a Rockbridge County High School student.

On Oct. 26 or 27 of last year, Nagy said, Owah picked up the juvenile victim as planned and drove him to the apartment complex.

There, Brandon and a third teenager, Stedman Jones, who didn't know about the robbery, got into Owah's car, prosecutors say.

Nagy said Brandon reached from the back seat and put his arm around the victim. Nagy said the victim believed Brandon had a knife.

"At this time a demand was made by Brandon for money and for the victim's shoes," said Nagy. "The victim would testify that money exchanged hands, but he refused to give Brandon his shoes."

During the incident, Nagy said, Owah noticed that the "prank" had gone too far and "attempted to stop the altercation."

"Owah attempted to physically remove Brandon from the car, and told Brandon to stop on multiple occasions," said Nagy.

In a written statement, Brandon told investigators with the CHARGE Gang Task Force the robbery "started out as a joke, but got carried away."

Drug Probe

While discussing the robbery case with investigators, Nagy said, Owah told police that Brandon had been giving away or selling pain pills since 2006.

Owah told investigators he had taken pills from Brandon on several occasions and revealed names of multiple players who also had received them, Nagy said.

Prosecutors say one witness would have testified that Brandon sold him drugs outside of school on multiple occasions and that he knew he was purchasing pills containing oxycodone, an opioid pain reliever found in such prescription medications as Percocet, Percodan and Oxycontin. The witness would have testified that on each of the occasions, large amounts, between 40 and 60 pills, were purchased for cash, prosecutors say.

Nagy said Brandon had access to a large amount of pills that belonged to his uncle, who purchased them with valid prescriptions.

Owah told investigators that pills were also distributed to multiple teammates before home games in the high school's locker room during the 2007 football season, prosecutors say.

Prosecutors say that Owah said that after taking the pills "it was like a high" and that "it was like my body was in slow motion."

The drug probe also looked into whether any of the football coaches knew that pills were being sold in the locker room. A Harrisonburg School Board report concluded the coaches did not have direct knowledge of the sales.

Prosecutors say it would have been difficult to prosecute the recipients of the drugs because there were no pills confiscated to determine the exact nature of the drugs or whether they were placebos. In Virginia, selling a placebo is a criminal offense but possessing one is not.

Harrisonburg police say they don't anticipate any further charges at this time.

Contact Pete DeLea at 574-6278 or pdelea@dnronline.com

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Prescription drug abuse more than kids getting high

Wed Jul 30 2008 6:47pm BST

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BOSTON (Reuters) - As state, federal and local authorities across the United States struggle to contain a rising tide of prescription-drug abuse, Reuters Boston Bureau Chief Jason Szep spoke with Stephen Pasierb, president and chief executive of the Partnership for a Drug-Free America, a non-profit advocacy group.

What follows are excerpts from the interview.

REUTERS: What prescription drugs are abused the most and how would you characterize the scale of the problem?

PASIERB: On the prescription side, there's a number of abused products or misused products, from the Attention Deficit things like Ritalin and Adderall on and on and on. But probably the most pernicious and most dangerous of all those are the prescription pain relievers. These are led by OxyContin and then the Percodan, Percocet and then followed up by Vicodin and all the hydrocodone generics.

A lot is said in this field about how this is a behavior simply of kids going out to get high. And we've always advanced the thesis that it's not that simple. And in fact we just completed some research about a month and a half ago which we did some Capital Hill briefings on, which really goes into this mindset that teenagers in particular have, where it's a much more purposeful behavior. They're quite sophisticated in their understanding of what these different drugs are. And while there is indeed a segment who simply use these as a new way to go out and get wrecked, there's an equal segment who are using them exactly for their intended purposes, but outside of a doctor's recommendation or prescription.

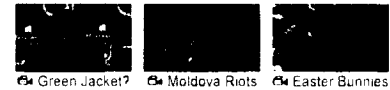
So, if you will, that college student who will tell you I am not a drug abuser, I am not a bad person. But if I can get Ritalin and Adderall to help me study, I'm going to do it. Because I have used it, and I get better grades on it'. So, to him or her, their experience is both very tactical and positive. So in the idea of trying to go tell them 'Well, that's bad', the results that this child has seen are exactly right and exactly in line so that they only see benefit.

And then you've got this other segment who are truly self medicating. They're either in pain, or they're depressed, or there's something going on in their life. And their misuse/abuse of prescription drugs has helped them manage their lives better. So, what is frequently thrown out there, particularly on the government side as prescription drug abuse, the new threat, is much more finesse than simply saying that. And we kind of layer on top of that, some additional attitudinal research we've done where if you look at both teenagers and young adults, and their parents, what you find is this kind of veil of safety and appropriateness around all of these products. You see the teenager saying it's a new and much safer way to get high, saying I wouldn't do illegal street drugs. You have no idea where those come from. But, heck, these are made in a sterile lab and they're FDA approved'. They see less risk in it.

We've also seen a scary number of websites where teenagers are saying that prescription pain relievers were not addictive. They're not like heroin'. Well, OxyContin is pharmaceutical heroin, there's really no difference between the two.

And so what you have for really the first time on the drug landscape in America is a kind of this shift from the host of agricultural products, what we call farming with a "F", marijuana, poppies, cocoa, to pharming with a "ph", this host of pharmaceutical products, from a wide range, which consumers are abusing and really see no downside, no stigma, I'm not a bad person, I'm not taking my health at risk'. None of the normal triggers that would play around substance abuse. Continued...

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Crisis, anger and guns

Bernd Debusmann

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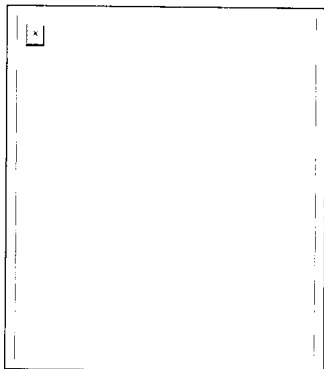
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Paging Dr. Alan Frischer - Drug Abuse

By Dr. Alan Frischer



Have you ever taken a prescription medication for a purpose other than it was intended – perhaps hoping to lose weight, feel better, improve focus at work or at school, or simply experience an escape? Why do some of us abuse medications, while others take them exactly as prescribed and stop when they are no longer medically needed? Which drugs are the most abused?

What begins as an appropriate use of a medication can for some become a dangerous addiction. The National Institute on Drug Abuse (NIDA) calculated that there are approximately nine million Americans who use prescription drugs for non-medical purposes. More than 50 percent get their drugs from a friend or relative for free, and another 20 percent get a prescription from a physician.

Prescription drug abuse isn't necessarily about bad drugs or bad people. It involves a complex group of factors including the power of addiction, misperceptions about drug abuse, and the difficulty for both patients and doctors to talk honestly about the problem. As a doctor who loves to talk to my patients, I still experience the occasional visit with an enormous elephant sitting with us in the room; an issue that the patient just cannot or will not speak of.

Doctors face a major challenge to ensure that legitimate pain/anxiety issues are addressed, while doing our best to weed out the actors. Our medical licensing board recognizes the gravity of this issue and now mandates that a doctor's required ongoing medical education include a 13-hour course be taken on proper pain management skills.

Just what are the dangers of abusing medication? Whether we are discussing street drugs or prescription medications, drug abuse brings trouble at school, at home, with friends, at work, or with the law. The likelihood that someone will commit a crime, be a victim of a crime, or have an accident is far higher when that person is abusing drugs.

Using drugs for the wrong reasons can pose serious health risks. These risks are multiplied when drugs are taken with other substances like alcohol, antihistamines, and central nervous system depressants. The dangers of prescription drug abuse include seizures, heart and lung problems, and even death, but the most common danger is addiction.

Addiction can be defined as a pattern of compulsive drug use characterized by a continued craving for drugs despite physical, psychological or social harm. Addicts will claim that they are using these drugs to feel "normal". I believe we are all seeking this goal; sometimes we find healthy ways to do this, and sometimes ways that are harmful.

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A recent government report found that among 12 to 17 year olds, roughly 2 million had experienced a major depressive episode in 2007 – representing about 8 percent of that age group. Illicit drug use was roughly twice as high, or 35 percent, among those youths who had experienced depression than among those who hadn't.

What are the signs of addiction? Foremost is the need to have a particular drug or substance, and the inability to stop that urge. An addict commonly experiences relief from anxiety, changes in mood from well being to belligerence, false feelings of self-confidence, increased sensitivity to sights and sounds including hallucinations, altered activity levels such as excessive sleep or wakefulness, and unpleasant or painful symptoms when deprived of the substance.

The risk for addiction is greatest among women, the elderly, and adolescents. Other risk factors include having a medical condition requiring pain medication, family history of addiction, excessive alcohol consumption, fatigue or overwork, poverty, depression, dependence, poor self-concept, and obesity.

Many become addicted to prescription drugs quite by accident, at first using the drugs for medically prescribed reasons, and gradually increasing the dosage and becoming abusers. Interestingly, women are two times as likely to become addicted to sedatives, but receive two to three times more prescriptions for sedatives than do men. Seniors are more at risk, perhaps because they receive more drug prescriptions. The fastest growing group of addicts, however, is 12 to 25 year olds.

The most abused prescription medications fall into three classes:

- 1.) Opioids, also known as narcotic analgesics, include oxycodone (OxyContin), hydrocodone (Vicodin), and meperidine (Demerol) and are prescribed primarily to treat pain. They work by attaching to opioid receptors in the brain and spinal cord to prevent the brain from receiving pain messages.
- 2.) Central Nervous System Depressants, including pentobarbital sodium (Nembutal), diazepam (Valium), alprazolam (Xanax), and lorazepam (Ativan). These drugs treat anxiety, tension, panic attacks, and sleep disorders. They work by slowing down the brain activity by increasing the activity of GABA, a neurotransmitter.
- 3.) Stimulants, such as methylphenidate (Ritalin), amphetamine/dextroamphetamine (Adderall), and dextroamphetamine (Dexedrine). They are used as stimulants to treat narcolepsy and ADHD. They work to increase brain activity, resulting in greater alertness, attention, and energy.

When we look at all abused substances, these are the biggest problems in order of frequency of emergency room visits: alcohol, cocaine, marijuana, heroin, alprazolam (Xanax), hydrocodone (Vicodin), oxycodone (OxyContin, Percocet, Percodan, Tylox), methadone, clonazepam (Klonopin), propoxyphene (Darvocet and Darvon), amphetamine (Dexedrine), lorazepam (Ativan), carisoprodol (Soma), diazepam (Valium), methamphetamine (speed), and trazadone (Deseryl).

Withdrawal occurs when the body no longer receives the outside source of the substance it has grown to expect and depend on. If withdrawal is from a stimulant like an amphetamine, the person will become groggy or excessively sleepy. If the withdrawal is from narcotics or alcohol, the person loses the calming effect and becomes irritable, unable to sleep, and may suffer seizures.

Treatment is usually behavioral and/or medical detox. For those who seek it, treatment can be quite effective: Studies by the National Institute on Drug Abuse show that 40 to 50 percent of those entering treatment programs remain drug free for three to five years. Another 30 percent significantly reduce their drug use.

Clearly, we would love to know why some people become addicted and other do not.

Imagine how useful it would be for doctors and patients to know this before prescribing. Perhaps this will be one of the many leaps in medicine made as a result of the mapping of the human genome.

Please remember:

- Always follow medication directions carefully and precisely.
- Do not increase or decrease your dose, or stop taking your medication without speaking with your doctor.
- Do not crush or break pills. This can dramatically increase the potency of some drugs.
- Be certain that you clearly understand the drug's effect on driving and other daily activities.
- Learn about the drug's potential interactions with alcohol, cigarettes, prescription medications and over-the-counter medications.
- Inform your doctor about any past history of substance abuse.
- Don't use other people's prescription medications, and don't share your own.

For further help, contact:

The Substance Abuse Treatment Facility Locator, which covers more than 12,000 treatment centers. 1-800-662-HELP (1-800-662-4357), or www.findtreatment.samhsa.gov

The National Institute on Drug Abuse: 310-443-1124, or www.nida.nih.gov

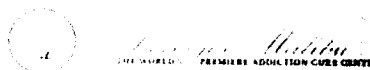
As always, I wish you all good health.

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Prescription drug crimes a signal to take notice

Our View

Drug stores and supermarkets usually aren't on the radar for would-be robbers, but when the prize is small, potent and easy to sell, they become targets.

Recent robberies of local pharmacies stocked with OxyContin, a potent prescription painkiller, should be a wake-up call for local residents who thought thieves and thugs were only interested in illicit drugs.

Lock up your prescription drugs now.

According to the Placer County Sheriff's Department, OxyContin abuse has risen over the past few years. In past months, thefts and attempted robberies of the drug have spiked as well.

Some thieves are probably drug abusers, while others are selling the pills for as much as \$40 apiece. Authorities suspect many thefts are simply from medicine cabinets by teens and children, and thus go unreported.

"Are there a lot of arrests? No, but we know (home theft) is happening," said Undersheriff Devon Bell. "We hear it from our school resource officers."

OxyContin addiction entered the public consciousness a few years ago when conservative radio show host Rush Limbaugh was charged with "doctor shopping," or using multiple written prescriptions to obtain the painkiller. Limbaugh, who suffered from chronic back pain, agreed to a plea deal that included 18 months of drug rehab.

One of dozens of pain relievers using the active ingredient oxycodone - Percocet and Percodan are two other prominent ones - OxyContin is commonly prescribed for cancer patients and people with chronic, debilitating pain.

But it's also known for the euphoria or high it can produce, especially when carefully crafted time-release pills are broken or combined with other drugs and alcohol. OxyContin's nickname, "hillbilly heroin," comes from its roots in the suburbs of the Southeast.

If you're using OxyContin or other prescription pain-killing medications, you should already be aware of its strength. If you're not prescribed to use it, you need to know that it can be abused.

Probably the easiest thing one can do is to keep prescription drugs in a locked case. You probably don't want family, friends or guests finding it available in your bathroom medicine cabinet, anyway.

If you're a parent, you should be concerned about its allure to your children and that it's quickly catching on among teens and young adults - especially during these uncertain and stressful economic times.

Don't be afraid to ask your kids about their friends and parents, especially if they are likely to hang out with different groups and attend gatherings and parties. Those unlocked prescription medications can be tempting to an adventurous teen.

And be on the lookout for potential abuse. Unlike the dramatic physical changes that accompany methamphetamine users, prescription drug abusers often can function undetected - but the damage is done nonetheless. Anxiety, insomnia, fever and flu-like symptoms all are potential signs of OxyContin abuse, and should be addressed immediately.

Prescription drug abuse has been around for years, but we appear to be entering a phase when criminals are willing to take extreme chances and kids are finding it way too easy to get high. Please, safeguard your medicine cabinet and talk to your children.

Keywords

drug, crime, robbery, prescription

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ABOUT 500 FEDERAL employees have a new collective agreement that will increase wages 6.8 to 20.3 per cent over four years, depending on the position, says Mike Coene, president of Customs and Immigration Union Local 19 in Point Edward. The deal covers Coast Guard, Fisheries and Oceans, Services Canada and Canada Border Service Agency personnel, he said.

Woman faces drug charges

A 34-YEAR-OLD Sarnia woman is in custody on drug charges following a bust at a Wellington Street residence Thursday night. Officers with the Sarnia Police Service Morality Unit executed a search warrant around 9 p. m. Officers seized six grams of crack cocaine, marijuana, hash oil, cash and various drug paraphernalia.

Businessman faces drug charges

A 56-YEAR-OLD Petrolia man faces drug charges after police executed a search warrant at his Railroad Street business Thursday. Officers with the OPP drug and canine units seized suspected marijuana, eight percodan tablets, cash and suspected drug paraphernalia. The owner will appear in Sarnia court on March 2.

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Laconia anticipates with caution a proposed methadone clinic

By JOHN KOZIOL jkoziol@citizen.com

Saturday, June 7, 2008

Laconia's top cop is cool to the idea of a methadone clinic opening in the city.

Police Chief Mike Moyer nonetheless says he wants to do a lot more homework before taking an official position, one way or another.

Moyer was responding Friday to published accounts that Metro Treatment of New Hampshire, an affiliate of Colonial Management Group of Orlando, Fla., was looking to open an outpatient substance abuse treatment clinic in a building on Primrose Drive South in the O'Shea Industrial Park.

City planning officials confirmed that a meeting had taken place with Metro but said the company has yet to submit a formal application.

Colonial Management Group, according to its website at www.methadone-treatment.com, operates 54 centers nationwide -- including in Keene, Concord and Manchester -- which are designed "for persons addicted to opiate/opioid class of drugs (Heroin, Dilaudid, Percodan, Percocet, Propoxyphene, etc.)..."

Methadone is a synthetic narcotic that has been used to treat addiction to heroin, morphine and other related drugs. In a treatment setting, methadone is ingested orally in liquid form once a day to suppress withdrawal symptoms.

Methadone is itself an addictive and powerful painkiller that in 2007 -- albeit in a tablet form -- claimed eight lives in Laconia and resulted in the formation of a task force to crack down on its illegal sale and use.

Those methadone deaths, said Moyer, are part of the reason why he is not sold on the benefits of a clinic in Laconia and also because, unlike the communities where Metro does have facilities, Laconia does not have a heroin problem.

"Presently, I'm researching clinics before I really take a strong stance. There are certainly good clinics and bad ones," said Moyer who, with other Laconia officers, toured Metro's Manchester clinic two months ago.

Speaking with his counterparts in communities that do have methadone clinics, Moyer said some told him that the clinics drew more drug addicts into the larger community, creating new problems.

The chief wondered why Metro would want to build a clinic in Laconia when the one in Concord is only 25 minutes away.

"Do we need two big facilities so close to each other? We don't have a huge heroin problem in this city; we have a huge methadone problem in the city."

Like Moyer, City Councilor Greg Knytych -- whose ward includes the O'Shea Industrial Park -- said his first reaction to having a methadone clinic in Laconia was not positive and that he, too, needed to study the matter in much greater detail.

"I know these clinics help people with addictions but I'm really drawing a blank as to why they're looking to come to Laconia and what that's going to do to the surrounding area," said Knytych.

"It still has to go through all the planning processes and I'm sure there will be plenty of opportunities for our and public input," he added.

Colonial Management recently tried to open a methadone clinic in Sanford, Maine. On May 20, the Sanford Town Council -- which initially implemented a moratorium on methadone clinics to prevent Colonial Management from operating at the Mid-Town Mall -- voted to extend the moratorium

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Health and Wellness News

Prescription Drug Addiction - OxyContin



Prescription Drugs Can Be Abused and Many Are Addictive

Atlanta, GA 11/20/2008 10:27 PM GMT (TransWorldNews)

Years ago, drug addicts had to go to the bad parts of town to get their drugs.

Some of the more upscale drug addicts may have been able to get



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accommodating dealers to deliver.

Not any more.

"The fastest growing addiction is not cocaine, heroin or crack," comments Mary Rieser, Executive Director for Narconon Drug Rehab Georgia. "the fastest growing addiction is to prescription drugs - ones found in the medicine cabinet, or purchased readily on the internet. Children steal these and sell or give these away at school. It's a whole new drug world out there."

Many people become unwittingly addicted to painkillers, especially OxyContin. After taking OxyContin for a few weeks, the body will go through opiate withdrawals if one stops taking the painkiller. Chills, cramps, muscle spasms, gastric upset- these are signs of opiate withdrawal.

What is OxyContin? OxyContin contains oxycodone, a derivative of opium. Opium is also used to produce morphine and heroin.

Oxycodone is synthesized from thebaine. Like morphine and hydromorphone, oxycodone is used as an analgesic. It is effective orally and is marketed alone in 10, 20, 40, 80, and 160 mg controlled-release tablets (OxyContin®), or 5 mg immediate-release capsules (OxyIR®), or in combination products with aspirin (Percodan®) or acetaminophen (Percocet®) for the relief of pain. All oxycodone products are in Schedule II. Oxycodone is abused orally, or the tablets are crushed and sniffed or dissolved in water and injected. The use of oxycodone has increased significantly. In 1993, about 3.5 tons of oxycodone were manufactured for sale in the United States. In 2003, about 41 tons were manufactured.

Historically, oxycodone products have been popular drugs of abuse among the narcotic abusing population. In recent years,

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Education News

Drug Addiction: Toll On Family During the Holidays
Alcohol and Drug Addiction A Toll On Family Relations
Atlanta, GA 11/30/2008 01:55 PM GMT (FIN:ITL)

This holiday season, many people will be confronted with the fact that someone in their family abuses drugs or alcohol.



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"This is easy to see when looking at the numbers," comments

Mary Rieser, Executive Director for Narconon Drug Rehab Georgia. "Take prescription opioids, such as OxyContin, Percocet, Percodan, and others, there are approximately 15 million people abusing these drugs in the United States today. This means that 5% of the population is abusing these drugs.

"This addiction puts a strain on the family, which then puts a strain on the drug addict, causing them to use more drugs and draw further away from the family. It is a widening circle, and if something is not done, death or jail are the only outcome."

Do not let someone you know go through the holidays drug addicted get them help.

One recovering addict commented, as they were in recovery:

"I started to come out of my shell a bit and not let people run over me. On this course I am learning to use my judgment, just as I am going to have to filter things in life and decide which things to stop or not.

"I thought about my mom while doing this. I tried to be upbeat and reassure her that everything was going okay for me and then I realized that it is not about me – it is about her.

"I realized that I can shift away from this and it is my decision whether or not I am going to let her actions affect me. I can also separate myself from her actions which are not helpful to me."

Often family relations become strained because of addiction and sometimes it is strained family relations that contribute to addiction.

Regardless of which it is, family is always involved in addiction. The Narconon program helps addicts take responsibility for their

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Abuse, dependence common in teen painkiller users

Tue Sep 9 2008 6:57pm BST

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NEW YORK (Reuters Health) - Seven percent of U.S. adolescents have used prescription pain relievers that were not prescribed to them, according to data from 2005-2006.

And more than one third of these young people were dependent on the drugs, were abusing them, or both, Dr. Li-Tzy Wu of Duke University School of Medicine in Durham, North Carolina and colleagues found.

Abuse of drugs like Vicodin, OxyContin and Percodan is becoming increasingly common among adolescents, the researchers point out, with one study finding that 13 percent of high school seniors had used prescription painkillers that weren't prescribed to them in their lifetimes, compared to 6 percent in the early 1990s.

To better understand the prevalence and patterns of prescription pain reliever use among U.S. teens, Wu and colleagues evaluated 2,675 adolescents 12 to 17 years old, who had participated in the 2005-2006 National Surveys of Drug Use and Health, 7 percent of whom reported the use of an unprescribed prescription pain killer in the past year. Adolescents who used the drugs had done so on 38 days in the previous 12 months, on average, and had used two different categories of the medications.

Abuse was defined as showing one or more symptom of abuse, such as getting in trouble with the law or having problems at school due to prescription pain reliever use, but no signs of dependence. Individuals were classified as being dependent if they met at least three criteria for dependence, such as needing to use more of the drug to get the same effect or experiencing withdrawal symptoms, while those who met one or two criteria for dependence but showed no signs of abuse were classified as having "subthreshold dependence."

Among prescription pain reliever users, 6.7 percent were classified as abusers; 19.6 percent showed subthreshold dependence, and 9.1 percent were dependent on the drugs, the researchers reported in *Journal of the American Academy of Child and Adolescent Psychiatry*. Dependent individuals had used drugs 86.7 days in the past year, on average, and used 3.9 categories of drug, compared with 55.6 days and 2.7 categories for the abusers, and 39.6 days and 2.1 categories for those with subthreshold dependence.

Individuals with subthreshold dependence are often not diagnosed with drug dependence, the researchers note, but in their study this level of use also was related to alcohol use, major depression, and emergency medical treatment.

The researchers conclude: "Dependence on prescription pain relievers can occur without abuse, and subthreshold dependence deserves to be investigated further for consideration in major diagnostic classification symptoms."

SOURCE: *Journal of the American Academy of Child and Adolescent Psychiatry*, September 2008.

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Prescription drug abuse more than kids getting high

Wed Jul 30, 2008 6:47pm EST

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BOSTON (Reuters) - As state, federal and local authorities across the United States struggle to contain a rising tide of prescription-drug abuse, Reuters Boston Bureau Chief Jason Szep spoke with Stephen Pasierb, president and chief executive of the Partnership for a Drug-Free America, a non-profit advocacy group.

What follows are excerpts from the interview.

REUTERS: What prescription drugs are abused the most and how would you characterize the scale of the problem?

PASIERB: On the prescription side, there's a number of abused products or misused products, from the Attention Deficit things like Ritalin and Adderall on and on and on. But probably the most pernicious and most dangerous of all those are the prescription pain relievers. These are led by OxyContin and then the Percodan, Percocet and then followed up by Vicodin and all the hydrocodone generics.

A lot is said in this field about how this is a behavior simply of kids going out to get high. And we've always advanced the thesis that it's not that simple. And in fact we just completed some research about a month and a half ago which we did some Capital Hill briefings on, which really goes into this mindset that teenagers in particular have, where it's a much more purposeful behavior. They're quite sophisticated in their understanding of what these different drugs are. And while there is indeed a segment who simply use these as a new way to go out and get wrecked, there's an equal segment who are using them exactly for their intended purposes, but outside of a doctor's recommendation or prescription.

So, if you will, that college student who will tell you I am not a drug abuser, I am not a bad person. But if I can get Ritalin and Adderall to help me study, I'm going to do it. Because I have used it, and I get better grades on it'. So, to him or her, their experience is both very tactical and positive. So in the idea of trying to go tell them Well, that's bad', the results that this child has seen are exactly right and exactly in line so that they only see benefit.

And then you've got this other segment who are truly self medicating. They're either in pain, or they're depressed, or there's something going on in their life. And their misuse/abuse of prescription drugs has helped them manage their lives better. So, what is frequently thrown out there, particularly on the government side as prescription drug abuse, the new threat, is much more finesse than simply saying that. And we kind of layer on top of that, some additional attitudinal research we've done where if you look at both teenagers and young adults, and their parents, what you find is this kind of veil of safety and appropriateness around all of these products. You see the teenager saying it's a new and much safer way to get high, saying I wouldn't do illegal street drugs. You have no idea where those come from. But, heck, these are made in a sterile lab and they're FDA approved'. They see less risk in it.

We've also seen a scary number of websites where teenagers are saying that prescription pain relievers were not addictive. They're not like heroin'. Well, OxyContin is pharmaceutical heroin, there's really no difference between the two.

And so what you have for really the first time on the drug landscape in America is a kind of this shift from the host of agricultural products, what we call farming with a "f", marijuana, poppies, cocoa, to pharming with a "ph", this host of pharmaceutical products, from a wide range, which consumers are abusing and really see no downside, no stigma, I'm not a bad person, I'm not taking my health at risk'. None of the normal triggers that would play around substance abuse. *Continued...*

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Bernie Debusmann

A 26 percent increase in gun purchases in the U.S. in the first two months of 2009 is great news for gun

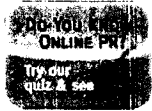


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is your teenager using prescription drugs behind your back?

Written by Christy Berger
 Friday, 23 January 2009

TestCountry Drug Test Panel Numbers Tally with NIDA Fact Sheet Reports on Prescription Drug Abuse San Diego, CA (FreePressReleases) January 15, 2009 - If sales of drug test panels are an indicator, then it could mean that prescription drug abuse among teenagers is on the rise. TestCountry.com, a leading online distributor of testing panels for various uses, has recently announced an increase in their sales of drug test panels, particularly those used for determining prescription drug abuse in teenagers. Topping the list is the sales figures for opiate panels. Opiate drugs are often prescribed to relieve pain. Examples include Vicodin, OxyContin and Percodan. Closely following sales figures for opiate panels are those for benzodiazepines and buprenorphine. Benzodiazepines like Valium, Ativan and Halcion are used to treat sleep disorders and anxiety. On the other hand, drugs containing buprenorphine are actually used for treating opioid addiction withdrawal. These trends coincidentally parallel the 2008 results of the annual survey made by the National Institute on Drug Abuse (NIDA), through its Monitoring the Future (MTF) program. According to the NIDA fact sheet, 15.4% of teenagers in the United States reported to have gone through prescription drug abuse in 2008. The survey further revealed that the substances being taken non-medically by these teenagers continue to be tranquilizers, barbiturates, amphetamines, opiates and sedatives. Other drugs being abused are those readily available at drugstore counters, such as cough medicine. But while the numbers describing prescription drug abuse among teenagers is considered as alarming, this percentage is still thought of as low when compared to that of teenagers struggling with the use of marijuana and other cannabis derived drugs. Marijuana remains to be the most commonly abused substance among teenagers in the United States. Of the teenagers surveyed by the MFT in 2008, 26.9% have reported using it. The TestCountry.com sales reports also indicate that sales of drug test panels for marijuana are three times the figures posted for prescription drug test panels. NIDA has reported that stress is one of the contributing factors behind prescription drug abuse among teenagers. The need to fit in and to perform well, coupled by peer pressure and lack of guidance from parents or guardians, can cause teenagers to cope with the use of prescription drugs. Lack of information has also led teenagers to believe that prescription drugs are safer than illegal substances like cocaine or heroine because they are prescribed by licensed doctors and are bought from a pharmacy. Prescription drugs are also the ones most readily available to teenagers. They can get their dosage from the medicine used by their parents and siblings. They can also persuade friends with conditions such as ADHD to give them some of their medicine. Despite the concerns raised by prescription drug abuse among teenagers, NIDA has nonetheless stated that there is a steady decline in substance abuse in that age group. Past year use of illegal drugs aside from marijuana is down from 13.1% in 2007 to 11.2% in 2008. The same goes for the use of crystal meth, from 1.6% to 1.1%. In NIDA's prescription drug abuse research, parental supervision is named as one of the factors deemed crucial towards the prevention of non-medicated use of prescription drugs among teenagers. Drug testing panels that are usable at home remain to be one of the most common ways that parents turn to in determining if the teenager in the household is taking drugs without prescriptions. For more information on prescription drug abuse among teenagers, please visit testcountry.org. About TestCountry TestCountry.com is an online home test kit superstore. The company offers home or work drug test kits for a variety of needs, including HIV / AIDS testing kits, pregnancy and fertility testing, paternity and DNA testing, drug abuse testing, steroid testing, nicotine testing, lead testing, health hazard detection, nutrition and wellness testing. TestCountry specializes in easy-to-use tests that can be individually administered in the security and privacy of a home or office. All shipments are packaged discreetly, thus respecting the privacy of clients. The company also operates exclusively through their web site, found at testcountry.com, and features a question and answer section, testcountry.org, providing responses to many common concerns users may have related to the various types of home testing at company blog <http://www.freepressreleases.com/testcountry.com>. Contact: Global Business Support Systems, Inc. DBA TestCountry 9570 Chesapeake Drive, Ste 601 San Diego, CA 92123 #444

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Nov-18-2008 13:01

Dangerous Drugs: Dead Patients

Dr. Phil Leveque Salem-News.com

Phillip Leveque has spent his life as a Combat Infantryman, Physician Pharmacologist and Toxicologist.

(MOLALLA, Ore.) - As a geezer, well into geezerhood, I read AARP News and Senior & Boomer News to see how I am fairing; AARP says we geezers are being screwed. Is there any other real news?



Image courtesy: howstuffworks.com

Well yes, Senior & Boomer News prints an article by Jack Pflug whom I read occasionally. He writes that Oregonians are paying the price for untreated drug & alcohol abuse which costs Oregonians \$5.9 billion a year. One of his subjects is the Drug Free Workplace Initiative. Actually this for some really perverse reason is aimed at legal cannabis/medical marijuana users.

A recent article I found on my computer indicates the 20 most dangerous drugs/causing most deaths. I will include those of pharmaceutical importance:

1. The Opiates; Oxycontin, M.S.Contin (morphine) & Percodan, et simila;
2. Barbiturates
3. Methadone
4. Alcohol
5. Valium et simila
6. Amphetamines
7. Tobacco (it acts like a drug and kills 100 thousand per year)
8. Methylphenidate (Ritalin)
9. Anabolic steroids

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Celtics learning that Pistons' resiliency is unmatched



May 23, 2008
By Mike Freeman
CBSSports.com National Columnist
Tell Mike your opinion!

BOSTON — On an evening when the Celtics initiated a hard-target search for Ray Allen, checking every gas station, residence, warehouse, farmhouse, henhouse, outhouse and doghouse — finally finding Allen and removing him from witness protection — it didn't matter.



Rip Hamilton shakes off a poor performance in Game 1 to lead Detroit. (Getty Images)

When the Detroit Pistons are off, they're off. When they flip that switch, they're almost unbeatable. We've seen this theatrical production before. They get spanked in Scene 1, Act 1 of a series then slap cold water on their faces and by the time the play is over, they're standing on the balcony with the girl in one arm, the fiddle in the other and the trophy between their teeth. They won't die, these Pistons. They just won't die. Punch them, stab them, kick them, shove them, launch them into deep orbit with a rocket. They get up, smile, Rasheed Wallace takes a technical and they keep on fighting. They might — might — have also stolen this series with a 103-97 win over Boston in Game 2. Of course, Detroit won the second game. They now have nine, Game 2 wins, which is second most in NBA postseason history. "Well, one, these guys have been through a lot," Detroit coach Flip Saunders said. "Our players, they've been here six times and what we did was we kept our composure. We had some guys that made some big shots whether it was Rip making a big shot in the fourth quarter, (Antonio McDyess) made a huge shot out of the corner, we got big-time offensive rebounds late in the game. Rip had one, Tay had one, Dyess had one." Sounds like a jazz band! Rip, Tay and Dyess Except these Pistons are hard-core rock and roll. Although it might seem nonsensical declaring a series nearly dead after only the second game, remember, the Celtics have yet to win a road contest in these playoffs. The Celtics treat the road the way Big Baby does a house salad. The Pistons are mind-boggling. They're the San Antonio Spurs of the East. They're so mentally tough they handed the Celtics their first home playoff loss this season. Although Richard Hamilton led the Pistons with 25 points the key to this game — and the epitome of toughness and grit — was Chauncey Billups, playing basically on one leg as the other still only has half a hamstring. Billups looked aged going against the sprightly Rajon Rondo in Game 1. He was clearly showing the effects of that injured leg. Well, either Billups is a quick healer or he discovered the miracle of Percodan. He was like a different player. He had 19 points, seven assists and made his two 3-pointers. Most importantly, unlike the first game, he didn't try to bogart his way into the offense with forced shots. He stayed in the flow and emphasized getting his teammates involved. "One thing I told Chauncey," Hamilton said, "you (don't have) to be over-aggressive out there. You can take your time and be the captain of our ship and we'll try to do a good job of helping you out on the offensive end and the defensive end. I thought he just stayed poised, directed us, put guys in positions to succeed." The first half of this game was so ugly it brought down the NBA's property values. The Celtics shot 22 percent from behind the 3-point line, the half had too many sloppy turnovers, too many whistles and of course the obligatory Wallace technical. Fortunately, players rose out of the primordial muck that was the over-officiated first-half mess and put on a beautiful show in the second. In his past three games, Allen was 7-for-24 from the field, including 0-for from the 3-point line. This time he had 25 points on 9-of-16 shooting. He connected on two of his four 3s. The Celtics, afterwards, to their credit, didn't attempt to downplay the importance of changing their road misfortune. "... There has to be a different urgency now," Boston coach Doc Rivers said. Boston is in trouble. That's right, trouble. After only two games. Not solely because of their road woes. But in trouble because they're fighting stone, cold Terminators.

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Mar-02-2009 12:50

Marijuana Vs. Morphine Drugs: Comparative Pharmacology

Dr. Phillip Leveque Salem-News.com

Phillip Leveque has spent his life as a WWII Combat Infantryman, Professor of Pharmacology, Forensic Toxicologist and Osteopathic Physician.

(MOLALLA, Ore.) - Morphine has long been the standard strong pain killer for almost any purpose. Certain similar drugs are considered more potent on the basis of dose.

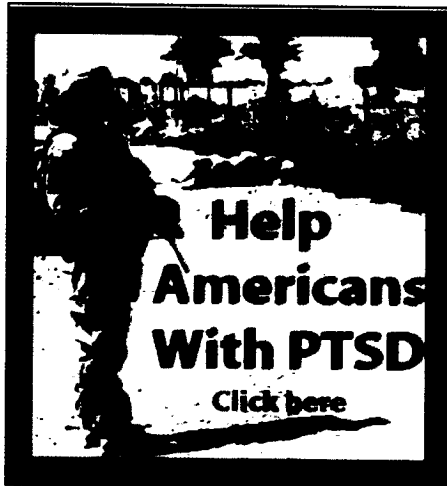
For example Dilaudids dose is 1.5 mg compared to morphine at 10 mg for the same effect. Heroin is about 3 mg, Oxycodone (Percodan) is about 10 mg but Oxycontin is a special long acting form which has caused thousands of deaths when patients pulverize the pills which causes immediate release of the drug.

While relief of pain is the main action of these drugs, they are called narcotics because they cause narcosis, the Greek word for sleep and/or stupor.

Morphine-like drugs work mostly on the brain and higher doses depress all functions with depression of respiration being the major cause of death.

They also cause severe constipation which can become much more than a nuisance.

Marijuana/cannabis also works on the brain but in a different manner causing euphoria which is about the opposite of depression.



"illegal, dangerous drug" marijuana. He told them to shove it. He was able with marijuana to drop morphine to 60 mg/day/



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Strangely cannabis was used widely for medicine thousands of years before opium but they were both discovered about the same time, 4000 B.C. Opium was used usually for dysentery. Opium & opiates did not become widely used until about the 19th century with the invention of the hypodermic syringe.

Marijuana/cannabis is far more versatile and effective for perhaps 200 different diseases while opiates are used almost solely for strong analgesia.

The worst adverse effect of all opiates is tolerance and powerful addiction. One of my patients was being given 460 mg of morphine a day by the VA Hospital. The usual dose is about 10 mg maybe 4 times a day. The VA wanted him to sign and agree to a contract that he would NOT use the

to drop morphine to 60 mg/day/

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Books

Pass the Percodan: Bruce Wagner Dissects Hollywood Cynicism

Jori Finkel

Tuesday, February 8th 2005

Reading *The Chrysanthemum Palace*, Bruce Wagner's latest novel, is like watching a drunk pretending to walk a straight line all the while knowing he's heading for a nasty spill. In this case the drunk is Thad Michelet, the self-loathing

son of a great American novelist, and the drinks are mixed with Percodan and Klonopin, which creates some wincingly funny moments on the set of the long-running TV series *Starwatch: The Navigators*, where he plays a noble Vorbalidian alien and his evil twin brother. Telling the story is actor-screenwriter Bertie Krohn, the self-loathing son of the celebrated creator of *Starwatch*. And bringing the two men closer is Clea Freemantle, another almost famous child of a Hollywood legend, who crosses paths with Bertie, a childhood romantic interest, at an AA meeting in Brentwood before falling hard for Thad. The players mesmerize, flaunting their end-of-the-line and end-of-the-road decadence (if they're not hugging the curves of Mulholland Drive, they're on a Vegas roller coaster version of it), but the book's strength is not exactly character depiction.

And certainly not character delineation. The leads think and speak remarkably alike—exchanging a casually witty, industry-savvy banter that's the linguistic equivalent of having drinks at the Chateau Marmont. Thus Thad is the more dissolute version of Clea, who may ultimately be the lapsed version of Bertie. This may all sound hard to stomach, but it's not as bad as you think. For *The Chrysanthemum Palace* has a moral core, showing how cynicism is the adult child of idealism. While critics sniped at Wagner's "Cellular Trilogy" for its crushing pessimism, this novel is colored by the memory of Bertie and Clea's fumbling teenage romance and haunted by the ghost of great artistic expectations, reminding us why "hopeful" so often goes with "Hollywood." In tone, anyway, *The Chrysanthemum Palace* is *The Great Gatsby* for an *Entertainment Weekly* age.

More by Jori Finkel

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smiled. "It's all going to work out. You'll see."

Moments later I sat downstairs with my hands over my ears. Overhead, Gemma banged around cussing at Lisa. Tears tricked down my cheeks as I reminded myself that I'd promised Jason I'd stay out of it. But I couldn't help fearing the worst. What was that thump? Was that glass breaking?

About 10 p.m. a man arrived and went upstairs. He was wearing Army fatigues with officer's stripes. He didn't leave till early the next morning.

It was almost two whole days before I saw Gemma or Lisa again. I'd heard Lisa's voice a couple of times. She sounded all right, but still, I worried about her. I was vacuuming when I heard a loud thump overhead. I shut off the machine and listened. The thumping stopped and started again several times. Then I heard Gemma hollering my name.

I bounded up the stairs and banged on her door. "It's open!" Gemma yelled. I pushed on the door, but it jammed against something. Reaching inside, I pulled a crushed cereal box from under the door and stepped into the apartment. Every inch was littered with something: dirty clothes, crumpled newspapers, half-empty tin cans, and rotting orange peels. A cardboard carton lay on its side in a puddle of milk near the bathroom door.

I stepped over it. "Gemma, where are you?"

"In the bedroom." Her voice was weak and scratchy.

I tiptoed around the mess, expecting to head through the little bedroom and find Gemma in the larger one. But there she was in the little bedroom, lying in the big purple bed, which filled the space almost wall to wall. Clothes were everywhere and the place smelled like vomit. A half-empty bottle of whiskey stood on the dresser. Next to it was a small handgun.

"I threw my back out moving this damn furniture," Gemma whined. "I've been trying to get your attention for half an hour. Didn't you hear me?"

"No, I was vacuuming." I pointed to the gun. "Is that thing loaded?"

"Nah, it's jes' to scare the bokes. Ya know, when they get too rough."

I looked around. "Where's Lisa?"

"In there." She nodded toward the other bedroom. "I traded rooms with 'er. Too cold in there for me."

I rushed into the other bedroom. Lisa was playing on the floor, completely naked, as usual. The heat was off again and her skin was blue with cold, except where it was purple with bruises.

I was livid. I grabbed a blanket from the bed, wrapped it around Lisa and led her into the other room. "Gemma, how could you leave Lisa in there naked? It's freezing. What's the matter with you?"

"I told ya. I threw me back out."

"Yeah. How'd you do it? Beating on Lisa?" I was done staying out of it.

Gemma squinted at me. "No! Ain't none o' your business, anyway. She's my kid, not yours."

"Isn't that a shame." I rummaged through the dresser till I found some clothes for Lisa. Her glasses were on the floor but the hearing aids were nowhere to be found. When I had the child dressed, I turned to Gemma, who was still moaning in the bed.

"Gemma, if you're really hurting I'll take you to the base hospital. Get yourself dressed and come downstairs."

"I bloody can't, woman. It hurts to move."

"Well, what do you want me to do? Dress you too?"

"Just get me some pain pills. In the bathroom. The yellow ones."

The bathroom was even filthier than the rest of the place. I was shocked to find the medicine cabinet loaded with prescription bottles - valium, percodan, quaaludes, and others I'd never heard of. I grabbed the percodan, since the pills were yellow, and took them to Gemma. "Are these what you want?"

"They'll do." Gemma grabbed the bottle, shook four pills into her hand, and reached for the whiskey.



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THE INDEPENDENT

Johann Hari: How to spot a lame, lame argument

Richard Dreyfuss: Out of the wreckage

Hollywood stars on the West End stage are not new. But none is haunted by a past of quite such drug-ravaged turmoil as this one

By David Usborne

Saturday, 31 January 2009

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For many of us the name Richard Dreyfuss in the credits of a film or on the marquee of a theatre is an instant bonus. "Good cast," we mutter knowingly. He is one of a generation of American actors who seem to imbue their art with an almost demented intensity while never shying from occasional crowd-pleaser roles, in his case in *Jaws* and *Close Encounters of the Third Kind*.

So how is it, then, that Dreyfuss, now 61, who for years reigned as the youngest man to get a best actor Oscar for his lead part in *The Goodbye Girl*, has begun to irritate more than please us – especially in Britain where he has been spending a lot of time lately, both acting and playing academe at St Anthony's College, Oxford?

The "difficult" Richard Dreyfuss, sniped one newspaper writer. The "once-bankable" Dreyfuss was a cruel slap lurking in one review last week of his latest theatre endeavour, *Complicit*, which has just opened at the Old Vic.

Maybe it is old-fashioned snobbery. Aside from being a Hollywood lefty, Dreyfuss has for some time been on a personal quest to encourage the teaching of civics and the mechanics of democracy and evangelises on the subject on American campuses. That's fine, but it seems mildly preposterous that he was until recently a senior associate member at an Oxford college.



GETTY IMAGES

The "once-bankable" Dreyfuss was a cruel slap lurking in one review last week of his latest theatre endeavour, Complicit, which has just opened at the Old Vic.

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And what is it that Yankee actors expect to find by hanging out in the West End rather than on Broadway? You might ask that also of Kevin Spacey, who as director of *Complicit* is sharing in the pain of the reviews. (They have been mostly lukewarm.)

Dreyfuss has said that he took the Oxford job "because I was in England looking for something to do, and because they asked me". It is worth noting, though, that he was at a loose end because of that odd saga in October 2004 when he dropped out of his role as Max Bialystock in the West End version of *The Producers* at the last minute.

The ostensible reason was back pain, though Dreyfuss was later to admit that he had been fired because he could not meet the physical demands of the show; his replacement was the none too agile Nathan Lane.

So let's add unreliable to the strikes against him. That seems to make sense in the light of the awful publicity he has been receiving thanks to *Complicit*, in which he plays a US newspaperman under legal pressure to expose his sources for a story on the torturing of terrorist suspects.

The press night was delayed for one week to allow for "more development time" with director Spacey. Dreyfuss reportedly was flubbing his words. Moreover, when the curtain did go up on opening night, the actor had an earpiece to allow for discreet prompting lest his lines escaped him once more. "Performers who cannot remember their lines should not be on stage," bleated the *Daily Mail*.

The *Mail* would not be much impressed with the excuses that Dreyfuss might offer for occasionally blanking – that he damaged his memory cells during years of reckless drug abuse. The truth is his career and his soul – he was diagnosed in early middle age with bipolar disorder – have been through times of extreme turbulence.

He has married three times, achieved rare heights of obnoxiousness as an addict and recently retired from movie-acting only suddenly to take it up again. (For which you might have been grateful if you enjoyed him playing Dick Cheney last year in Oliver Stone's *W.*) And we haven't even mentioned the headlines late last year about the lawsuit he filed against his own father and uncle claiming they owe him \$4m on a property loan of \$870,000 made 25 years ago. That seemed kind of crummy.

"There have been things in my life I have no regrets about," he noted recently, adding that in some ways his addictive personality has added up to his having a "screw loose". He told the interviewer, "Other things I've done, I wince at. The drugs, the arrogance. That stuff. But does anyone live a life of constant triumph?" Considerable triumph has nonetheless been his.

He was born in Brooklyn as Richard Dreyfus. Note the altered spelling. Dreyfuss, who is Jewish, claims to be a distant relative of Alfred Dreyfus, the captain wrongfully dispatched as a spy to Devil's Island in French Guiana. His father Norman, a lawyer and restaurateur, and Geraldine, a political activist, raised him in Los Angeles.

As a teen – and smoking pot – he had an epiphany about the absolute importance of ending all wars, triggering a need to participate in politics that has never left him. Dreyfuss became a conscientious objector, escaping the Vietnam draft and instead doing service as a clerk in the basement of a Los Angeles hospital. And it was there where he had his first experience of a new variety of drugs – uppers to keep him awake. Drugs and booze inhabited Dreyfuss through most of the 1970s, years that were among his most successful.

Dreyfuss landed a bit part in *The Graduate* in 1967, but it was his appearance in *American Graffiti* in 1973 that put him in the big league. Thereafter came his collaboration with Steven Spielberg, who gave him starring roles first in *Jaws* (1975) and then *Close Encounters* (1977). *The Goodbye Girl* came out the same year. (Dreyfuss held the record as the youngest man to win the Oscar for best actor until 2003 when the 29-year-old Adrien Brody won for *The Pianist*.)

The early 1980s were largely lost to rehab, but Dreyfuss made a celluloid comeback in 1986 with *Down and Out*

in Beverly Hills. In 1991 he landed a comedy role opposite Bill Murray in the widely acclaimed *What About Bob?* and four years later he was nominated for best actor again for *Mr Holland's Opus*, though he didn't win.

The usual shorthand for how Dreyfuss got clean begins and ends with a car crash in 1982. He smashed his Mercedes into a palm tree and woke up hanging upside down beneath it. The shame of the police finding cocaine and Percodan tablets in the wreckage drove him to rehab. Of course, it was more complicated than that, as Dreyfuss himself explains in the pages of *Moments of Clarity*, a new book about prominent people escaping addiction by Christopher Kennedy Lawford.

Like others in the book, Dreyfuss writes in first person about his experiences. By the time of the crash, he says, he had become "a board member and probably chairman of admissions for the Assholes Center". The humiliation was crushing, but within days he was back to his old tricks, drinking and attending cocaine-fuelled sex orgies.

Yet everywhere he went, he was accompanied by a vision of a little girl in a pink dress and horn-rimmed glasses. She was even there at one of the orgies and it was on that day that the actor was overcome with revulsion with himself. "I knew that little girl was either the little girl that I didn't kill that night I completely lost control of my car, or she was the girl, the daughter I hadn't had yet. I knew that as a certain fact." He then reveals: "I sobered up on November 19, 1982. My daughter was born November 19, 1983. My daughter wears horn-rimmed glasses."

In those pages, Dreyfuss speaks also of being 16 different personalities in one man and the search for the chemical formula he takes today, legally prescribed for his condition.

He seems to have arrived at a point of reasonable peace now. He is still acting, he is pursuing his passions about civics and he is approaching the third anniversary of his third marriage – to a Russian, Svetlana Erokhin.

On his return to the London stage, he told reporters that he was "very excited to have a chance of not being fired before the opening". And though they carped about the earpiece, most critics had little bad to say about his acting.

A life in brief

Born: Richard Stephen Dreyfus, 29 October 1947, Brooklyn, New York. He later added the second S to his surname.

Family: Married to Svetlana Erokhin, his third wife. Has one daughter and two sons from his first marriage.

Early life: At the age of nine his family moved to Los Angeles, where he starred in plays at the Beverly Hills Jewish Center. Dreyfuss was later kicked out of San Fernando Valley State College for demanding that a professor apologise for criticising Marlon Brando's performance in a production of *Julius Caesar*.

Career: Although his first screen role was in *The Graduate*, the breakthrough came playing Baby Face Nelson in *Dillinger*. Dreyfuss went on to win the best actor Oscar in 1978 for *The Goodbye Girl*. After his arrest for cocaine possession in 1982, he received an Oscar nomination in 1996 for *Mr Holland's Opus*. Dreyfuss has kept busy with his political activism, as well as a stint lecturing at Oxford University. He appeared as Dick Cheney in *W* last year.

He says: "I've been rich and famous. And I've been broke. I've had love and success. I've had all the money in the world. I've questioned everything I've had so far. I have no regrets about being a movie star."

They say: "I was really looking for actors who were still closer to their own memories of their own childhoods. Richard Dreyfuss was a bigger kid than the children he was raising." Steven Spielberg, director of *Close*

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Prescription Drugs in Schools

Posted: Nov 17, 2008 04:50 PM EST

Updated: Nov 19, 2008 04:50 AM EST

Featured Video

- Prescription Drugs in Schools

by Michael Schwanke (Wichita, KS)

It's becoming the drug of choice for teens. It's cheap, easy to get, and hard to detect.

Related Stories

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While use of all other drugs declines, prescription drug use is climbing.

Where are teens getting the drugs?

"From their parents I'm sure-their grandparents maybe," says Belle Plaine senior Jeni Burrows. Belle Plaine Chief of Police Gordon Fell says Burrows is right.

Associated Links

- How to Dispose of Your Medication

"Parents, the days of stockpiling medication are over," says Fell, who is working to educate parents.

He's dealt with the problem already. In April, two Belle Plaine Middle School students were arrested for passing pain killers to other

students.

While it hasn't become a big problem in Belle Plaine, Fell and school officials are working to keep it that way.

"I think it's new and on-going and something we need to become aware of," says Principal Monte Stewart taking to parents.

Burrows doesn't use drugs, but hears other students talk. She says teens are turning to prescriptions because they're easy.

"Prescription drugs are simple and easy to get access to and a lot of times kids don't have to pay for them because their parents have them," says Burrows.

The most commonly abused prescription drugs are pain killers.

A study by the Department of Justice found that more than eight percent of 12 to 17-year-olds have abused a pain killer.

Common brand names include Lorcet, Lortab, Oxycontin, Percocet, Percodan, Tylox and Vicodin.

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Teen Prescription Drug Use Increasing

Posted on: Wednesday, 19 September 2007 18:22:00



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Prescription drug abuse is on the rise in teenagers according to a report posted Tuesday. Almost 7% of teens are using prescription drugs that were not prescribed for them.

According to Dr. Li-Tzy Wu of Duke University School of Medicine in Durham, North Carolina, one third of these adolescents are dependent on, or are abusing these drugs.

Abusing drugs such as Vicodin, OxyContin and Percodan is more common with teens, with one report discovering that 13 percent of high school seniors had used painkillers that were not prescribed to them.

This is an alarming increase compared to about 6 percent of seniors in the early 1990s.

To track and study teenage drug use more effectively and understand the increase in numbers, Wu and colleagues evaluated 2,875 adolescents that were 12 to 17 years old. These students participated in the 2005-2006 National Surveys of Drug Use and Health.

According to the survey, almost 7 percent of the teens reported the use of a prescription painkiller in the past year.

According to Wu and the study, "Dependence on prescription pain relievers can occur without abuse, and sub-threshold dependence deserves to be investigated further for consideration in major diagnostic classification systems."



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vulnerable to alcohol-related damage are the cerebral cortex (largely responsible for our higher brain functions, including problem solving and decision-making), the hippocampus (important for memory and learning), and the cerebellum (important for movement coordination).

Marijuana is the most commonly abused illicit substance. This drug impairs short-term memory and learning, the ability to focus attention, and coordination. It also increases heart rate, can harm the lungs, and can cause psychosis in those at risk.

Inhalants are volatile substances found in many household products, such as oven cleaners, gasoline, spray paints, and other aerosols, that induce mind-altering effects. Inhalants are extremely toxic and can damage the heart, kidneys, lungs, and brain. Even a healthy person can suffer heart failure and death within minutes of a single session of prolonged sniffing of an inhalant.

Cocaine is a short-acting stimulant, which can lead abusers to "binge" (to take the drug many times in a single session). Cocaine abuse can lead to severe medical consequences related to the heart, and the respiratory, nervous, and digestive systems.

Amphetamines, including methamphetamine, are powerful stimulants that can produce feelings of euphoria and alertness. Methamphetamine's effects are particularly long lasting and harmful to the brain. Amphetamines can cause high body temperature and can lead to serious heart problems and seizures.

Ecstasy (MDMA) produces both stimulant and mind-altering effects. It can increase body temperature, heart rate, blood pressure, and heart wall stress. Ecstasy may also be toxic to nerve cells.

LSD is one of the most potent hallucinogenic, or perception-altering, drugs. Its effects are unpredictable, and abusers may see vivid colours and images, hear sounds, and feel sensations that seem real but do not exist. Abusers also may have traumatic experiences and emotions that can last for many hours. Some short-term effects can include increased body temperature, heart rate, and blood pressure; sweating; loss of appetite; sleeplessness; dry mouth; and tremors

Heroin is a powerful opiate drug that produces euphoria and feelings of relaxation. It slows respiration and can increase risk of serious infectious diseases, especially when taken intravenously. Other opioid drugs include morphine, Oxy Contin, Vicodin, and Percodan, which have legitimate medical uses; however, their nonmedical use or abuse can result in the same harmful consequences as abusing heroin.

Prescription medications are increasingly being abused or used for nonmedical purposes. This practice cannot only be addictive, but in some cases also lethal. Commonly abused classes of prescription drugs include painkillers, sedatives, and stimulants. Among the most disturbing aspects of this emerging trend is its prevalence among teenagers and young adults, and the common misperception that because these medications are prescribed by physicians, they are safe even when used illicitly.

Steroids, which can also be prescribed for certain medical conditions, are abused to increase muscle mass and to improve athletic performance or physical appearance. Serious consequences of abuse can include severe acne, heart disease, liver problems, stroke, infectious diseases, depression, and suicide.

Drug combinations. A particularly dangerous and not uncommon practice is the combining of two or more drugs. The practice ranges from the co-administration of legal drugs, like alcohol and nicotine, to the dangerous random mixing of prescription drugs, to the deadly combination of heroin or cocaine with fentanyl (an opioid pain medication). Whatever the context, it is critical to realize that because of drug-drug interactions, such practices often pose significantly higher risks than the already harmful individual drugs.

In the concluding statements I would like to mention that the contents that is reflected in this article is definitely not the newer one to the people of Manipur, but through this instalment of Kolkata Watch I once again wanted to say "No to drug" in the particular context of Manipur.

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News

UM student arrested in Walgreens robberies

Story by Mark Page | March 6, 2009
Montana Kaimin

Police have arrested and charged a University of Montana student for allegedly committing three armed-robberies at Walgreens pharmacy on North Reserve Street, all of which occurred over about the past month.

Missoula police, along with agents from the Drug Enforcement Agency, raided a house on Gerald Avenue Wednesday evening and arrested Daniel Nania, finding a large amount of pharmaceuticals and other evidence at the home.

The Walgreens was robbed on Jan. 31, Feb. 21 and March 3.

"I want to salute the good work of the Missoula Police Department," U.S. Attorney Bill Mercer said. "This is the sort of crime that is going to create a large fear factor in the community."

Nania is being held at the Missoula County Detention Center and could face up to 20 years in federal prison if convicted. The case is federal because the DEA has control over crimes involving thefts from pharmacies.

According to court documents, when police raided Nania's home they found more than 10,000 prescription pills of various sorts, numerous bulk-sized pill bottles, a BB handgun and \$3,132. The address had already been under surveillance by officers of the Missoula Police Department, who believed narcotics were being sold out of the residence.

Nania is accused of stealing cash, oxycodone, Ritalin, Percodan and alprazolam.

Police also recovered a dark jacket with a light strip, camouflage pants and sunglasses, which match the clothing the robber was wearing when caught on camera.

All of the evidence was found in a common area of the basement adjacent to Nania's bedroom.

In interviews with the Kaimin, Nania's roommates declined to say anything about the case or about Nania except to say that they did not have anything to do with the robberies.

"We were not involved in any way," said roommate Mike Campbell.

During the first two robberies, the perpetrator never pulled a weapon but simply opened his jacket to show the clerk a handgun in his waistband.

The behavior escalated during the robbery early Tuesday morning when the suspect pulled out pepper or bear spray, initially pointing it at the clerk before pulling out a gun and ordering both the clerk and pharmacist to the ground, threatening to shoot if they didn't comply.

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WINEHOUSE BLAMES CRACK ADDICTION ON LSD HALLUCINATIONS

AMY Winehouse last night blamed her addiction to crack cocaine on a hallucination of the devil she saw while high on LSD.

The *Rehab* singer said Satan appeared before her in the guise of a six-foot Jamaican called Barrington while she was visiting a council flat with a steel door just off Westbourne Grove.

She said Beelzebub incanted curses over her in a strange, heavily accented English before selling her a small bag of sensimilla, three rocks of crack, a Kit-Kat, and a small plastic pipe, all for £25.

The singer said: "Okay, I had dabbled in drugs before Lucifer cast his spell, a little weed, some coke, a bit of smack and the odd pint of Night Nurse with a Benylin chaser.

"I'd tried ketamine, crystal meth, amphetamine, ecstasy, crushed up valium, Temazepam, PCP, GHB, mescaline, amyl nitrate, Vim, unleaded petrol, cider ice lollies and Jagermeister.

"I'd done Darvon, Lortab, methadone, morphine, Percodan, some Phenaphen with Codeine, Talacen, Tramadol, lots of Tylenol, some Ultram, but never all at the same time like now, and I never touched Vicodin.

"That is the work of the devil."

A spokeswoman for Beelzebub said Satan did appear on earth in human form but that he was much more likely to manifest as Al Pacino, Liz Hurley or Richard and Judy than a large West Indian.

She said: "The devil is all about spreading evil and confusion, he is not, and never has been, a man for reinforcing negative stereotypes about black people."



A typical LSD Satan

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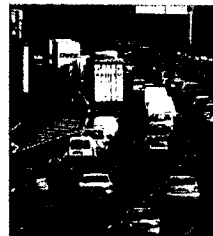
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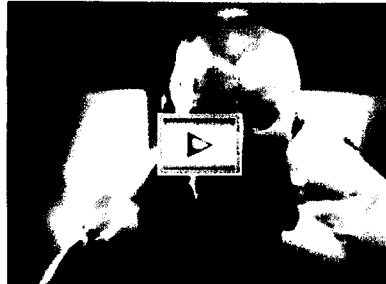


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The New York Times
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Women's Health

SPECIAL EDITION

October 30, 1996

Yet Another Sex Difference Found: Gaining Relief From a Painkiller

By NATALIE ANGIER

When President Clinton first uttered the remark "I feel your pain" back in 1992, he may have set himself up for years of razzing and mockery, but in one sense, at least, he was right: the person he was addressing, an irate AIDS activist, was male.

A new report suggests that men and women experience pain very differently from one another, and that clinicians would do well to consider sex distinctions when prescribing pain medications. Researchers have found that a class of opiate drugs of little benefit in relieving pain in men work quite robustly in women.

The study indicates that the brain's circuitry for perceiving and responding to pain is wired roughly along either a male or female plan, although at this point scientists know nothing about what the underlying neurochemical differences may be.

Dr. Jon D. Levine and his colleagues at the University of California at San Francisco report in the November issue of *Nature Medicine* that when they administered drugs called kappa opioids to a group of 28 young men and 20 young women who were having their wisdom teeth extracted, the women had a far more powerful response to the drugs, and the easing of pain lasted considerably longer. Each patient received an intravenous dose of either nalbuphine, marketed under the trade name Nubain, or butorphanol, marketed as Stadol.

When all factors, including differences in body size were considered, the kappa opioids worked twice as well for the women as for the men. Significantly, the women had reported greater pain to begin with.

"What we found was really much more dramatic than what we would have

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considered in our wildest imagination," Dr. Levine said. "In the men, the response was small and short-acting," whereas the women were generally freed of their pain and were sent home hours later from the dental clinic with as much pain abatement as they initially had.

In fact, the scientists were so struck by the starkly divergent clinical outcomes that they assumed others must have observed the same sex differences in their use of kappa opioids. But when they scoured the scientific literature, they found not a word of it.

"Apparently nobody had noticed," Dr. Levine said. Nor had anybody ever asked the question, "Do women and men respond differently to drugs used in the treatment of pain?"

Dr. Karen J. Berkley, a neuroscientist at Florida State University in Tallahassee, who wrote a commentary that accompanies the new report, said in an interview that the discovery "opens all kinds of important questions, and the fact that they did it is to be congratulated."

The discovery joins a growing list of unexpected physical and pharmacological differences between the sexes that researchers have only recently begun to tally. They have inspired in their efforts by complaints from women's health advocates that women have too often been omitted from clinical trials and so have been treated by the medical profession rather like short men. Beyond obvious differences in reproductive organs and far more contentious claims of differences in innate behavior or skills -- with men billed as aggressive, competitive bison-hunter types who do well in mathematics, and women portrayed as the more cooperative gatherer types with a flair for language -- researchers have noticed a wide range of other, subtler variations.

The liver appears to differ between men and women, for example, which could explain why women metabolize alcohol and other drugs less efficiently than men do, and why they are more susceptible to alcohol-related diseases.

Depression is diagnosed far more often in women, yet men as a group respond better to antidepressant medication. Women infected with the human immunodeficiency virus often progress more quickly to full-fledged AIDS than do infected men.

When given anesthesia for surgery, women recover more rapidly than men do from its effects, waking up about 7 minutes after surgery as compared with men's 11 minutes, said Dr. Peter S. Glass of Duke University Medical Center.

None of the sex differences are absolute, but rather are group averages with considerable overlap.

In their new study, Dr. Levine and his co-workers set out to look specifically at sex differences in response to pain medication, as part of a larger study to consider the influence of a spectrum of variations, like age and ethnicity, on a patient's response to various medical treatments.

They already knew that a number of studies had shown that women often report experiencing greater pain than men do. In trials where women and men have been subjected to the same intense stimulus, women give it a higher pain rating than men do. Moreover, when asked about their overall clinical pains, women report aches and discomforts in more body parts than men do.

The meaning of such discrepancies is open to multiple interpretations, though, said Dr. Berkley. Women might actually feel more pain, which is impossible to measure with current technology; pain is a subjective experience that doctors can only gauge by asking a patient how much it hurts. Alternatively, men may be less willing to admit to pain than women are, for sociocultural reasons. Third, women may be "sensibly less tolerant of pain," said Dr. Berkley, and thus more demanding that they get some relief.

Dr. Levine and his colleagues set out to see how the perception of pain related to the treatment of pain, beginning with the study of kappa opioids. These medications are one of three "flavors" of opiate drugs, Dr. Levine said, the others being sigma opioids and mu opioids. Each drug selectively affects different targets, or receptors, in the brain, which exist as part of the body's mechanism for controlling pain; opiate drugs work because they are chemically related to the body's native painkillers and thus can "talk" to the brain's pain receptors. The drugs are named after the receptor class they communicate with most strongly, the kappa opioids linking up to kappa receptors, the sigma opioids to sigma receptors, and mu to mu.

The mu opioid drugs are considered the gold standard of pain medications, which include such famous narcotics as morphine, codeine, Percodan and, yes, heroin. In treating fierce or unremitting pain, doctors generally turn to the mu opioids, because their analgesic power knows no upper limits.

Dr. Russell K. Portenoy, co-chief of the pain and palliative care service at Memorial Sloan-Kettering Cancer Center in New York, said that in his experience, women and men showed no difference in their reaction to the morphine-like drugs.

The kappa opioids are less well known and less widely used than the mu opioids, though one of the kappa drugs used in the trial, Nubain, is a staple in the treatment of labor pain. Thus there is precedent for believing that the kappa opioids are effective painkillers for women, although a specific exploration of sex-related aspects of the drugs had not been done until now.

For pain other than the full-throttle misery of labor, several studies had shown the kappa opioids to be disappointing, and as a result pharmaceutical companies have not been pursuing the class of drugs with much zest. Dr. Levine said the poor performance of the kappa opioids might reflect the fact that men were overrepresented in past trials.

In the new study, the researchers conclude that the kappa opioids may bring as much pain relief for women as the mu opioids do, and Dr. Levine proposes that clinicians might consider giving their female patients a kappa opioid to treat acute pain.

One reason a kappa opioid might be preferred over a mu opioid is the difference in side effects. Drugs like morphine can cause sleepiness, constipation, nausea, mental confusion and, on occasion, addiction, although pain specialists argue that when mu opioids are used appropriately such troubles can be avoided. By comparison, the kappa opioids are less sedating and dizzying than the mu opioids and are probably not terribly addictive; their biggest drawback is that they can prompt so-called dysphoria -- a vague sense of feeling awful.

But other researchers cautioned against leaping to clinical conclusions based on this one study, and called for more and bigger trials. They also emphasized the importance of learning why women differ from men in their reaction to kappa opioids. It did not seem to matter where the women were in their menstrual cycle when they took the painkillers, suggesting that variations in the level of the female sex hormones, estrogen and progesterone, were not the explanation for the sex discrepancy in opiate effectiveness.

Alternatively, testosterone could inhibit the drug, and because men have more of the hormone than women do, they could have that much weaker a response.

But researchers said that sex hormones were a kind of crutch on which scientists too often leaned to explain all sex differences. They pointed out that women might have a different distribution of kappa receptors than men did, or that their kappa receptors might be more easily activated. Alternatively, the X and Y chromosomes that help distinguish male from female may encase any number of genes that grant women the edge in pain relief, and that men may, in this case, give their eye teeth to own.

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Ban Is Advised on 2 Top Pills for Pain Relief

By GARDINER HARRIS
Published: July 01, 2009

ADELPHI, Md. — A federal advisory panel voted narrowly on Tuesday to recommend a ban on Percocet and Vicodin, two of the most popular prescription painkillers in the world, because of their effects on the liver.

Multimedia

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The two drugs combine a narcotic with acetaminophen, the ingredient found in popular over-the-counter products like Tylenol and Excedrin. High doses of acetaminophen are a leading cause of liver damage, and the panel noted that patients who take Percocet and Vicodin for long periods often need higher and higher doses to achieve the same effect.

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Acetaminophen is combined with different narcotics in at least seven other prescription drugs, and all of these combination pills will be banned if the Food and Drug Administration heeds the advice of its experts. Vicodin and its generic equivalents alone are prescribed more than 100 million times a year in the United States.

Lauren Cassidy, a spokeswoman for Abbott Laboratories, which makes Vicodin, said. "The F.D.A. will make a final determination and Abbott will follow the agency's guidance."

The agency is not required to follow the recommendations of its advisory panels, but it usually does.

The panel's 20-17 vote to recommend a ban on the combination drugs was one of 11 it took at a meeting called to advise the F.D.A. on problems arising from the extraordinary popularity of acetaminophen. In 2005, American consumers bought 28 billion doses of products containing the ingredient.

While the medicine is effective in treating headaches and reducing fevers, even recommended doses can cause liver damage in some people. And more than 400 people die and 42,000 are hospitalized every year in the United States from overdoses.

In hopes of reducing some of these accidents, the committee voted 24 to 13 to recommend that the F.D.A. reduce the highest allowed dose of acetaminophen in over-the-counter pills like Tylenol to 325 milligrams, from 500. And members voted 21 to 16 to

The Summer Running Slump

July 14, 2009 4:45 AM

The Voices of Type 2 Diabetes

July 14, 2009 2:50 PM

After Cancer, Gratitude for Simple Pleasures

July 14, 2009 6:39 AM

When Married People Become Single Again

July 14, 2009

The Roving Runner: A Trip to the Cloisters

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3. Really? The Claim: Cold Temperatures Improve Sleep
4. Asperger's Syndrome, on Screen and in Life
5. Personal Health: The Fog That Follows Chemotherapy
6. Forty Years, War: Lack of Study Volunteers' Hobbies, Cancer Fight

reduce the maximum daily dosage to less than 4,000 milligrams.

But they voted 20 to 17 against limiting the number of pills allowed in each bottle, with members saying such a limit would probably have little effect and could hurt rural and poor patients. Bottles of 1,000 pills are often sold at discount chains.

"We have no data to show that people who overdose shop at Costco," said Dr. Edward Covington, a panel member from the Cleveland Clinic Foundation.

Dr. Lewis S. Nelson, a toxicologist from the New York University School of Medicine who served as the panel's acting chairman, said experts had been warning of the dangers of combination painkillers like Percocet, which is made by Endo Pharmaceuticals, and Vicodin for years.

Still, the recommendation is likely to come as a shock to many patients, who may be unaware of the dangers of high doses of acetaminophen — even if they know the drugs contain the ingredient.

Some doctors already avoid prescribing pills that combine acetaminophen with narcotics like oxycodone (found in Percocet) and hydrocodone (in Vicodin).

"It ties the doctor's hands when you put the two drugs together," said Dr. Scott M. Fishman, a professor of anesthesiology at the University of California, Davis, and a former president of the American Academy of Pain Medicine. "There's no reason you can't get the same effect by using them separately."

Dr. Fishman said the combinations were prescribed so often for the sake of convenience, but added, "When you're using controlled substances, you want to err on the side of safety rather than convenience."

Still, some doctors predicted that the recommendation would put extra burdens on physicians and patients.

"More people will be suffering from pain," said Dr. Sean Mackey, chief of pain management at Stanford University Medical School. "More people will be seeing their doctors more frequently and running up health care costs."

In a statement, Johnson & Johnson, Tylenol's maker, said it "strongly disagrees" with the proposed restrictions on acetaminophen, adding that they would be likely to "lead to more serious adverse events as consumers shift to other over-the-counter products," like Advil and aspirin.

Linda A. Suydam, president of the Consumer Healthcare Products Association, said the committee had ignored studies showing that doses sold by her members — two pills of 500 milligrams, up to four times a day — were safe. "I think this is a very effective dose and one needed for individuals who experience chronic pain," she said.

The committee also turned its attention to over-the-counter children's medicines containing acetaminophen, voting 36 to 1 to limit them to a single formulation. Right now the liquids are sold in two different concentrations, leading to confusion among doctors and parents.

"I don't think it's safe to have two formulations out there," said Dr. Nelson, the acting chairman.

- 7. Vital Signs: Exercise: Workouts May Cut Cholesterol in Women
- 8. Health Plan Opponents Make Voices Heard
- 9. Medical Papers by Ghostwriters Pushed Through
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The members were divided over which formula to recommend, the concentrated or the less concentrated one. F.D.A. officials suggested that they would likely settle on the less concentrated formula so that if parents make a mistake, they would be less likely to overdose.

Acetaminophen is included in a vast array of over-the-counter cough and cold products, including Nyquil, Excedrin and many others. A small share of accidental poisonings result when people take two or more of these combination products without understanding the risk.

The F.D.A. asked the committee whether it should ban combination products that include acetaminophen. The vote was 24 to 13 against such a ban, with many members saying consumers saw the products as valuable.

"Based on the data provided, the combination O.T.C. medications really contributed very little to overall poisonings," said Dr. Osemwota A. Omoigui, a panel member from the Los Angeles Pain Clinic.

A 2005 study found that most poisonings resulted from patients' taking Vicodin and similar products that combine a narcotic with acetaminophen.

"I think this is the one place where we can engineer in safety," said Dr. Judith M. Kramer, a panel member and an associate professor of medicine from Duke University Medical Center who voted to ban the combination prescription medicines. "We're here because there are inadvertent overdoses that are fatal, and this is our one opportunity to have a big impact."

Consumers need to be better educated about the risks of popular medicines, most panel members agreed.

"If you keep track of what you're taking, none of this is an issue for you," Dr. Jan Engle, a panel member and head of the Department of Pharmacy Practice at the University of Illinois in Chicago, said in an interview after the meeting.

Donald G. McNeil Jr. contributed reporting from New York.

This article has been revised to reflect the following correction:

Correction: July 6, 2009

Because of an editing error, an article on Wednesday about a federal advisory panel's recommendation to ban the painkillers Percocet and Vicodin misstated the surname at one point for a professor of anesthesiology who said, "When you're using controlled substances, you want to err on the side of safety rather than convenience." As the article correctly noted elsewhere, he is Dr. Scott M. Fishman, not Fisher.

A version of this article appeared in print on July 1, 2009, on page A1 of the New York edition.

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Attachment 9

**Recently Issued Trademark Registrations
Covering Both Pharmaceuticals and Medical Devices**

Owner	Mark
Allergan, Inc., Irvine, CA	Design Only , U.S. Reg. No. 3,589,203, registered 3/10/2009
Allergan, Inc.	ALLERGAN , U.S. Reg. No. 3,596,709, registered 3/24/2009
Aradigm Corporation, Hayward, CA	Design Only , U.S. Reg. No. 3,435,266, registered 5/27/2008
	ADVANCING DRUG DELIVERY , U.S. Reg. No. 3,435,262, registered 5/27/2008
King Pharmaceuticals, Inc., Bristol, TN, assigned as collateral to Credit Suisse, New York, NY	K KING PHARMACEUTICALS & Design , U.S. Reg. No. 3,589,117, registered 3/10/2009
	Design Only , U.S. Reg. No. 3,396,250, registered 3/11/2008
Mentor Corporation, Santa Barbara, CA	MENTOR , U.S. Reg. No. 3,504,553, registered 9/23/2008
Nektar Therapeutics, San Carlos, CA	NEKTAR , U.S. Reg. No. 3,068,889, registered 3/14/2006
Neurorecovery, Inc., Tuscaloosa, AL	NEURORECOVERY , U.S. Reg. No. 2,673,450, registered 1/7/2003
Pfizer Health AB, Stockholm, Sweden	Design Only , U.S. Reg. No. 3,315,472, registered 10/23/2007
Tapemark Company (The), West. St. Paul, MN	JUST THINK OF THE POSSIBILITIES! U.S. Reg. No. 3,181,507, registered 12/5/2006

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 00:28:52 ET

Serial Number: 78963933 Assignment Information Trademark Document Retrieval

Registration Number: 3589203

Mark



Standard Character claim: No

Current Status: Registered.

Date of Status: 2009-03-10

Filing Date: 2006-08-30

Transformed into a National Application: No

Registration Date: 2009-03-10

Register: Principal

Law Office Assigned: LAW OFFICE 114

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2009-02-02

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. Allergan, Inc.

Address:

Allergan, Inc.
2525 Dupont Drive
Irvine, CA 92612
United States

Legal Entity Type: Corporation
State or Country of Incorporation: Delaware
Phone Number: 714-246-5507
Fax Number: 714-246-4249

GOODS AND/OR SERVICES

International Class: 005

Class Status: Active

House mark used for a line of pharmaceuticals used in connection with anti-aging, the treatment of glabellar lines, facial wrinkles, asymmetries and defects and conditions of the human skin, facial aesthetic surgery, facial aesthetic reconstruction, breast aesthetics and anti-obesity

Basis: 1(a)

First Use Date: 2006-11-30

First Use in Commerce Date: 2006-11-30

International Class: 010

Class Status: Active

House mark used for a line of medical devices used in connection with anti-aging, the treatment of glabellar lines, facial wrinkles, asymmetries and defects and conditions of the human skin, facial aesthetic surgery, facial aesthetic reconstruction, breast aesthetics and anti-obesity

Basis: 1(a)

First Use Date: 2006-11-30

First Use in Commerce Date: 2006-11-30

International Class: 041

Class Status: Active

Education services, namely, classes, seminars and workshops in the fields of breast aesthetic and reconstruction, facial aesthetic and anti-obesity surgery, weight reduction and weight maintenance, and distribution of course materials in connection therewith

Basis: 1(a)

First Use Date: 2006-11-30

First Use in Commerce Date: 2006-11-30

International Class: 044

Class Status: Active

Medical informational services in the fields of breast aesthetic and reconstruction, facial aesthetic and anti-obesity surgery; weight reduction, diet planning and supervision; nutrition counseling

Basis: 1(a)

First Use Date: 2006-11-30

First Use in Commerce Date: 2006-11-30

ADDITIONAL INFORMATION

Color(s) Claimed: Color is not claimed as a feature of the mark.

Design Search Code(s):

26.03.12 - Ovals with bars, bands and lines

26.03.28 - Miscellaneous designs with overall oval shape, including amoeba-like shapes and irregular

ovals; Oval shape (miscellaneous overall shape)

Prior Registration Number(s):

1723189

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2009-03-10 - Registered - Principal Register

2009-02-02 - Law Office Registration Review Completed

2009-01-28 - Allowed for Registration - Principal Register (SOU accepted)

2009-01-28 - Examiner's Amendment Entered

2009-01-28 - Notification Of Examiners Amendment E-Mailed

2009-01-28 - EXAMINERS AMENDMENT E-MAILED

2009-01-28 - SU-Examiner's Amendment Written

2008-09-02 - Notification Of Non-Final Action E-Mailed

2008-09-02 - NON-FINAL ACTION E-MAILED

2008-09-02 - SU - Non-Final Action - Written

2008-08-25 - Teas/Email Correspondence Entered

2008-08-25 - Communication received from applicant

2008-08-25 - TEAS Response to Office Action Received

2008-03-10 - Notification Of Non-Final Action E-Mailed

2008-03-10 - NON-FINAL ACTION E-MAILED

2008-03-10 - SU - Non-Final Action - Written

2008-02-26 - Statement of use processing complete

2008-02-26 - Extension 1 granted

2008-01-30 - Amendment to Use filed
2008-01-30 - Extension 1 filed
2008-01-31 - TEAS Extension Received
2008-01-31 - TEAS Statement of Use Received
2007-08-21 - Noa Mailed - SOU Required From Applicant
2007-05-29 - Published for opposition
2007-05-09 - Notice of publication
2007-03-31 - Law Office Publication Review Completed
2007-03-31 - Assigned To LIE
2007-03-07 - Approved for Pub - Principal Register (Initial exam)
2007-03-07 - Teas/Email Correspondence Entered
2007-03-06 - Communication received from applicant
2007-03-06 - TEAS Response to Office Action Received
2007-01-30 - Non-final action e-mailed
2007-01-30 - Non-Final Action Written
2007-01-24 - Assigned To Examiner
2006-09-07 - Notice Of Design Search Code Mailed
2006-09-06 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Correspondent

ALLERGAN, INC.
2525 DUPONT DR
IRVINE, CA 92612-1599
Phone Number: 714-246-5507
Fax Number: 714-246-4249

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 00:29:46 ET

Serial Number: 78952383 Assignment Information Trademark Document Retrieval

Registration Number: 3596709

Mark

ALLERGAN

(words only): ALLERGAN

Standard Character claim: Yes

Current Status: Registered.

Date of Status: 2009-03-24

Filing Date: 2006-08-15

Transformed into a National Application: No

Registration Date: 2009-03-24

Register: Principal

Law Office Assigned: LAW OFFICE 104

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2009-02-17

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. Allergan, Inc.

Address:

Allergan, Inc.
2525 Dupont Drive

Irvine, CA 92612
United States
Legal Entity Type: Corporation
State or Country of Incorporation: Delaware
Phone Number: 714-246-5507
Fax Number: 714-246-4249

GOODS AND/OR SERVICES

International Class: 005

Class Status: Active

House mark used for a line of pharmaceuticals used in connection with anti-aging, the treatment of glabellar lines, facial wrinkles, asymmetries and defects and conditions of the human skin, facial aesthetic surgery, facial aesthetic reconstruction, breast aesthetics and anti-obesity

Basis: 1(a)

First Use Date: 1990-09-30

First Use in Commerce Date: 1992-01-22

International Class: 010

Class Status: Active

House mark used for a line of medical devices used in connection with anti-aging, the treatment of glabellar lines, facial wrinkles, asymmetries and defects and conditions of the human skin, facial aesthetic surgery, facial aesthetic reconstruction, breast aesthetics and anti-obesity

Basis: 1(a)

First Use Date: 2006-11-30

First Use in Commerce Date: 2006-11-30

International Class: 041

Class Status: Active

Patient education services, namely, classes, seminars and workshops in the fields of breast aesthetic and reconstruction, facial aesthetic and anti-obesity surgery

Basis: 1(a)

First Use Date: 2006-11-30

First Use in Commerce Date: 2006-11-30

International Class: 044

Class Status: Active

Medical informational services in the field of breast aesthetic and reconstruction, facial aesthetic and anti-obesity surgery

Basis: 1(a)

First Use Date: 2006-11-30

First Use in Commerce Date: 2006-11-30

ADDITIONAL INFORMATION

Prior Registration Number(s):

1711041

1748079

2147765

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2009-03-24 - Registered - Principal Register

2009-02-17 - Law Office Registration Review Completed

2009-02-14 - Allowed for Registration - Principal Register (SOU accepted)

2009-01-29 - Examiner's Amendment Entered

2009-01-27 - Notification Of Examiners Amendment E-Mailed

2009-01-27 - EXAMINERS AMENDMENT E-MAILED

2009-01-27 - SU-Examiner's Amendment Written

2008-10-08 - Notification Of Final Refusal Emailed

2008-10-08 - Final refusal e-mailed

2008-10-08 - SU - Final Refusal - Written

2008-09-16 - Teas/Email Correspondence Entered

2008-09-16 - Communication received from applicant

2008-09-16 - TEAS Response to Office Action Received

2008-04-03 - Notification Of Non-Final Action E-Mailed

2008-04-03 - NON-FINAL ACTION E-MAILED

2008-04-03 - SU - Non-Final Action - Written

2008-04-03 - Previous allowance count withdrawn

2008-03-31 - Withdrawn From Issue - Examining Attorney Request

2008-03-20 - Law Office Registration Review Completed

2008-03-19 - Allowed for Registration - Principal Register (SOU accepted)

2008-02-26 - Statement of use processing complete
2008-02-26 - Extension 1 granted
2008-01-30 - Amendment to Use filed
2008-01-30 - Extension 1 filed
2008-01-31 - TEAS Extension Received
2008-01-31 - TEAS Statement of Use Received
2007-08-14 - Noa Mailed - SOU Required From Applicant
2007-05-22 - Published for opposition
2007-05-02 - Notice of publication
2007-03-23 - Law Office Publication Review Completed
2007-03-23 - Assigned To LIE
2007-02-27 - Approved for Pub - Principal Register (Initial exam)
2007-02-06 - Teas/Email Correspondence Entered
2007-02-05 - Communication received from applicant
2007-02-05 - TEAS Response to Office Action Received
2006-12-14 - Non-final action e-mailed
2006-12-14 - Non-Final Action Written
2006-12-07 - Assigned To Examiner
2006-08-18 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Correspondent

ALLERGAN, INC.
2525 DUPONT DR
IRVINE, CA 92612-1599
Phone Number: 714-246-5507
Fax Number: 714-246-4249

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Serial Number: 77285159 Assignment Information Trademark Document Retrieval

Registration Number: 3435266

Mark



Standard Character claim: No

Current Status: Registered.

Date of Status: 2008-05-27

Filing Date: 2007-09-20

Transformed into a National Application: No

Registration Date: 2008-05-27

Register: Principal

Law Office Assigned: LAW OFFICE 117

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2008-05-27

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. Aradigm Corporation

Address:

Aradigm Corporation
3929 Point Eden Way
Hayward, CA 94545
United States

Legal Entity Type: Corporation
State or Country of Incorporation: California

GOODS AND/OR SERVICES

International Class: 005
Class Status: Active
pharmaceutical preparations for the treatment of respiratory conditions
Basis: 1(a)
First Use Date: 2007-07-16
First Use in Commerce Date: 2007-07-16

International Class: 010
Class Status: Active
medical devices for the aerosolized delivery of pharmaceuticals; drug delivery systems
Basis: 1(a)
First Use Date: 2000-07-14
First Use in Commerce Date: 2000-07-14

ADDITIONAL INFORMATION

Color(s) Claimed: Color is not claimed as a feature of the mark.

Description of Mark: The mark consists of a triangle and swirling lines.

Design Search Code(s):

26.01.26 - Coils; Spirals; Swirls
26.05.12 - Triangles with bars, bands and lines
26.05.21 - Triangles that are completely or partially shaded
26.17.07 - Heat, lines depicting; Lines depicting speed, propulsion, heat or wind; Propulsion, lines depicting; Speed, lines depicting; Wind, lines depicting
26.17.09 - Bands, curved; Bars, curved; Curved line(s), band(s) or bar(s); Lines, curved

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2008-05-27 - Registered - Principal Register

2008-03-11 - Published for opposition

2008-02-20 - Notice of publication

2008-02-04 - Law Office Publication Review Completed
2008-02-04 - Assigned To LIE
2007-12-22 - Approved for Pub - Principal Register (Initial exam)
2007-12-22 - Assigned To Examiner
2007-09-27 - Notice Of Design Search Code Mailed
2007-09-26 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Harold Milstein

Correspondent

HAROLD MILSTEIN
HELLER EHRMAN LLP
275 MIDDLEFIELD RD
MENLO PARK, CA 94025-3592
Phone Number: 650-324-7000
Fax Number: 650-324-0638

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Serial Number: 77285146 Assignment Information Trademark Document Retrieval

Registration Number: 3435262

Mark

ADVANCING DRUG DELIVERY

(words only): ADVANCING DRUG DELIVERY

Standard Character claim: Yes

Current Status: Registered.

Date of Status: 2008-05-27

Filing Date: 2007-09-20

Transformed into a National Application: No

Registration Date: 2008-05-27

Register: Principal

Law Office Assigned: LAW OFFICE 117

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Current Location: 650 -Publication And Issue Section

Date In Location: 2008-05-27

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. Aradigm Corporation

Address:

Aradigm Corporation
3929 Point Eden Way

Hayward, CA 94545
United States
Legal Entity Type: Corporation
State or Country of Incorporation: California

GOODS AND/OR SERVICES

International Class: 005
Class Status: Active
pharmaceutical preparations for the treatment of respiratory conditions
Basis: 1(a)
First Use Date: 2007-07-16
First Use in Commerce Date: 2007-07-16

International Class: 010
Class Status: Active
medical devices for the aerosolized delivery of pharmaceuticals; drug delivery systems
Basis: 1(a)
First Use Date: 2000-07-14
First Use in Commerce Date: 2000-07-14

ADDITIONAL INFORMATION

Disclaimer: "DRUG DELIVERY"

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2008-05-27 - Registered - Principal Register
2008-03-11 - Published for opposition
2008-02-20 - Notice of publication
2008-02-05 - Law Office Publication Review Completed
2008-02-05 - Assigned To LIE
2007-12-29 - Approved for Pub - Principal Register (Initial exam)
2007-12-29 - Examiner's Amendment Entered

2007-12-29 - Notification Of Examiners Amendment E-Mailed

2007-12-29 - EXAMINERS AMENDMENT E-MAILED

2007-12-29 - Examiners Amendment -Written

2007-12-22 - Notification Of Non-Final Action E-Mailed

2007-12-22 - Non-final action e-mailed

2007-12-22 - Non-Final Action Written

2007-12-22 - Assigned To Examiner

2007-09-26 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Harold Milstein

Correspondent

HAROLD MILSTEIN

HELLER EHRMAN LLP

275 MIDDLEFIELD RD

MENLO PARK, CA 94025-3592

Phone Number: 650-324-7000

Fax Number: 650-324-0638

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 00:31:38 ET

Serial Number: 78842125 Assignment Information Trademark Document Retrieval

Registration Number: 3589117

Mark



King Pharmaceuticals

(words only): K KING PHARMACEUTICALS

Standard Character claim: No

Current Status: Registered.

Date of Status: 2009-03-10

Filing Date: 2006-03-21

Transformed into a National Application: No

Registration Date: 2009-03-10

Register: Principal

Law Office Assigned: LAW OFFICE 107

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2009-02-03

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. King Pharmaceuticals, Inc.

Address:

King Pharmaceuticals, Inc.
501 Fifth St.

Bristol, TN 37620

United States

Legal Entity Type: Corporation

State or Country of Incorporation: Tennessee

GOODS AND/OR SERVICES

International Class: 005

Class Status: Active

Full line of pharmaceutical preparations; and medical devices, namely, auto-injectors filled with pharmaceuticals for use in the treatment of chemical nerve agent poisoning, insecticide poisoning, pain, headaches, migraines, neurological disorders, seizures, convulsions, psychiatric disorders, anxiety, acute agitation, acute alcohol withdrawal, stress disorders, skeletal muscle spasms, status epilepticus, and spasticity, nerve agent auto-injector kits consisting primarily of auto-injectors filled with pharmaceuticals for immediate and portable self-administration of emergency treatment

Basis: 1(a)

First Use Date: 2006-06-08

First Use in Commerce Date: 2006-06-08

International Class: 010

Class Status: Active

Medical devices, namely, auto-injectors, nerve agent auto-injector kits consisting primarily of auto-injectors for immediate and portable self-administration of emergency treatment, and medical syringes

Basis: 1(a)

First Use Date: 2006-06-08

First Use in Commerce Date: 2006-06-08

International Class: 036

Class Status: Active

Charitable services, namely, a patient assistance program that provides charitable contributions in the form of financial assistance to charities to assist needy medical patients in obtaining prescription pharmaceuticals

Basis: 1(a)

First Use Date: 2006-06-08

First Use in Commerce Date: 2006-06-08

International Class: 041

Class Status: Active

Educational services, namely, providing incentives to people and organizations to demonstrate excellence in the field of philanthropy, kindness and humanitarian effort, through the issuance of awards

Basis: 1(a)

First Use Date: 2006-06-08

First Use in Commerce Date: 2006-06-08

International Class: 042

Class Status: Active

Research and development in the field of pharmaceuticals

Basis: 1(a)

First Use Date: 2006-06-08

First Use in Commerce Date: 2006-06-08

International Class: 044

Class Status: Active

Charitable services, namely, a patient assistance program to provide drugs free of charge to needy medical patients without prescription drug coverage

Basis: 1(a)

First Use Date: 2006-06-08

First Use in Commerce Date: 2006-06-08

ADDITIONAL INFORMATION

Color(s) Claimed: Color is not claimed as a feature of the mark.

Disclaimer: "PHARMACEUTICALS"

Lining and Stippling: The mark is not in color.

Design Search Code(s):

02.01.33 - Grotesque men formed by letters, numbers, punctuation or geometric shapes; Stick figures

04.07.03 - Geometric figures or combinations of geometric figures representing a person; Geometric figures representing a person; Geometric shapes forming a person; Person formed by geometric shapes

26.01.21 - Circles that are totally or partially shaded.

26.17.09 - Bands, curved; Bars, curved; Curved line(s), band(s) or bar(s); Lines, curved

Prior Registration Number(s):

2871392

2874243

2893097

2927077

2927078

2927079

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2009-06-22 - TEAS Change Of Correspondence Received

2009-05-06 - Assignment Of Ownership Not Updated Automatically

2009-03-10 - Registered - Principal Register

2009-02-19 - Attorney Revoked And/Or Appointed

2009-02-19 - TEAS Revoke/Appoint Attorney Received
2009-02-03 - Law Office Registration Review Completed
2009-01-27 - Allowed for Registration - Principal Register (SOU accepted)
2009-01-26 - Statement of use processing complete
2009-01-08 - Amendment to Use filed
2009-01-26 - Case Assigned To Intent To Use Paralegal
2009-01-08 - TEAS Statement of Use Received
2009-01-07 - Assignment Of Ownership Not Updated Automatically
2008-07-29 - Noa Mailed - SOU Required From Applicant
2008-05-06 - Published for opposition
2008-04-16 - Notice of publication
2008-04-03 - Law Office Publication Review Completed
2008-04-02 - Approved for Pub - Principal Register (Initial exam)
2008-03-28 - Examiner's Amendment Entered
2007-11-28 - Notification Of Examiners Amendment E-Mailed
2007-11-28 - EXAMINERS AMENDMENT E-MAILED
2007-11-28 - Examiners Amendment -Written
2007-11-26 - Previous allowance count withdrawn
2007-11-09 - Withdrawn From Pub - Og Review Query
2007-10-30 - Law Office Publication Review Completed
2007-10-30 - Approved for Pub - Principal Register (Initial exam)
2007-10-25 - Examiner's Amendment Entered
2007-10-24 - Notification Of Examiners Amendment E-Mailed
2007-10-24 - EXAMINERS AMENDMENT E-MAILED
2007-10-24 - Examiners Amendment -Written
2007-05-25 - NON-FINAL ACTION E-MAILED

2007-05-25 - Non-Final Action Written
2007-04-27 - Previous allowance count withdrawn
2007-04-09 - Withdrawn From Pub - Og Review Query
2007-03-07 - Law Office Publication Review Completed
2007-03-07 - Approved for Pub - Principal Register (Initial exam)
2007-03-06 - Examiner's Amendment Entered
2007-03-05 - EXAMINERS AMENDMENT E-MAILED
2007-03-05 - Examiners Amendment -Written
2007-02-15 - Teas/Email Correspondence Entered
2007-02-15 - Communication received from applicant
2007-02-15 - Assigned To LIE
2007-01-19 - TEAS Response to Office Action Received
2006-08-08 - Non-final action e-mailed
2006-08-08 - Non-Final Action Written
2006-08-07 - Assigned To Examiner
2006-03-25 - Notice Of Design Search Code Mailed
2006-03-24 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Maury M. Tepper, III

Correspondent

Maury M. Tepper, III
Tepper & Eyster PLLC
3724 Benson Drive
Raleigh NC 27609
Phone Number: 919-861-8901
Fax Number: 919-861-8913

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 00:32:19 ET

Serial Number: 78842009 Assignment Information Trademark Document Retrieval

Registration Number: 3396250

Mark



Standard Character claim: No

Current Status: Registered.

Date of Status: 2008-03-11

Filing Date: 2006-03-21

Transformed into a National Application: No

Registration Date: 2008-03-11

Register: Principal

Law Office Assigned: LAW OFFICE 107

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2008-02-05

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. King Pharmaceuticals, Inc.

Address:

King Pharmaceuticals, Inc.
501 Fifth St.
Bristol, TN 37620
United States

Legal Entity Type: Corporation
State or Country of Incorporation: Tennessee

GOODS AND/OR SERVICES

International Class: 005
Class Status: Active
full line of pharmaceutical preparations
Basis: 1(a)
First Use Date: 2006-06-08
First Use in Commerce Date: 2006-06-08

International Class: 010
Class Status: Active
Medical devices, namely, auto-injectors, nerve agent auto-injector kits consisting primarily of auto-injectors filled with pharmaceuticals for immediate and portable self-administration of emergency treatment, and medical syringes
Basis: 1(a)
First Use Date: 2006-06-08
First Use in Commerce Date: 2006-06-08

International Class: 036
Class Status: Active
Charitable services, namely, a patient assistance program that provides charitable contributions in the form of financial assistance to charities to assist needy medical patients in obtaining prescription pharmaceuticals
Basis: 1(a)
First Use Date: 2006-06-08
First Use in Commerce Date: 2006-06-08

International Class: 041
Class Status: Active
Educational services, namely, providing incentives to people and organizations to demonstrate excellence in the field of philanthropy, kindness and humanitarian effort, through the issuance of awards
Basis: 1(a)
First Use Date: 2006-06-08
First Use in Commerce Date: 2006-06-08

International Class: 042
Class Status: Active
Research and development in the field of pharmaceuticals
Basis: 1(a)
First Use Date: 2006-06-08
First Use in Commerce Date: 2006-06-08

International Class: 044
Class Status: Active
Charitable services, namely, a patient assistance program to provide drugs free of charge to needy medical patients without prescription drug coverage
Basis: 1(a)

First Use Date: 2006-06-08

First Use in Commerce Date: 2006-06-08

ADDITIONAL INFORMATION

Color(s) Claimed: Color is not claimed as a feature of the mark.

Design Search Code(s):

02.01.33 - Grotesque men formed by letters, numbers, punctuation or geometric shapes; Stick figures

04.07.03 - Geometric figures or combinations of geometric figures representing a person; Geometric figures representing a person; Geometric shapes forming a person; Person formed by geometric shapes

26.01.21 - Circles that are totally or partially shaded.

26.17.09 - Bands, curved; Bars, curved; Curved line(s), band(s) or bar(s); Lines, curved

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2009-06-22 - TEAS Change Of Correspondence Received

2009-02-19 - Attorney Revoked And/Or Appointed

2009-02-19 - TEAS Revoke/Appoint Attorney Received

2009-01-07 - Assignment Of Ownership Not Updated Automatically

2008-03-11 - Registered - Principal Register

2008-02-05 - Law Office Registration Review Completed

2008-02-05 - Allowed for Registration - Principal Register (SOU accepted)

2008-02-04 - Statement of use processing complete

2008-01-09 - Amendment to Use filed

2008-01-09 - TEAS Statement of Use Received

2007-07-10 - Noa Mailed - SOU Required From Applicant

2007-04-17 - Published for opposition

2007-03-28 - Notice of publication

2007-02-27 - Law Office Publication Review Completed
2007-02-27 - Approved for Pub - Principal Register (Initial exam)
2007-02-15 - Teas/Email Correspondence Entered
2007-02-15 - Communication received from applicant
2007-02-15 - Assigned To LIE
2007-01-19 - TEAS Response to Office Action Received
2006-08-08 - Non-final action e-mailed
2006-08-08 - Non-Final Action Written
2006-08-07 - Assigned To Examiner
2006-03-25 - Notice Of Design Search Code Mailed
2006-03-24 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Maury M. Tepper, III

Correspondent

Maury M. Tepper, III
Tepper & Eyster PLLC
3724 Benson Drive
Raleigh NC 27609
Phone Number: 919-861-8901
Fax Number: 919-861-8913

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 00:33:02 ET

Serial Number: 77395414 Assignment Information Trademark Document Retrieval

Registration Number: 3504553

Mark

MENTOR

(words only): MENTOR

Standard Character claim: Yes

Current Status: Registered.

Date of Status: 2008-09-23

Filing Date: 2008-02-12

Transformed into a National Application: No

Registration Date: 2008-09-23

Register: Principal

Law Office Assigned: LAW OFFICE 116

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2008-09-23

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. Mentor Corporation

Address:
Mentor Corporation
201 Mentor Drive

Santa Barbara, CA 93111
United States
Legal Entity Type: Corporation
State or Country of Incorporation: Minnesota

GOODS AND/OR SERVICES

International Class: 005

Class Status: Active

Dermal filler kits comprising a pre-filled syringe; Self contained syringes and ampules sold full for dispensing prepackaged pharmaceuticals in the nature of hyaluronic acid and derivatives thereof alone, or in combination with other polysaccharides, and with or without lidocaine, injected under the skin, used to reduce or eliminate fine lines and wrinkles, fill scars and contour the lips and face; Pharmaceutical preparations for use in treating dermatology, oncology, hematology, ophthalmology and gastroenterological disorders, and for use in tissue and organ transplantation; pharmaceutical preparations for use in the prevention and treatment of disorders of the nervous system, the immune system, the cardio-vascular system, the metabolic system, the respiratory system, the musculo-skeletal system, the genitourinary system, and for the treatment of inflammatory disorders

Basis: 1(a)

First Use Date: 1970-00-00

First Use in Commerce Date: 1970-00-00

International Class: 010

Class Status: Active

Silicone and saline breast implants; breast implants consisting of artificial materials and parts and components therefore; Plastic surgery devices, namely, mammary prostheses, surgical devices in the nature of tissue expanders, facial and chin implants consisting of artificial materials, malar implants consisting of artificial materials, rhinoplasty prostheses, and surgical instruments in the nature of injection port detectors; Medical surgical instruments, namely, reinforcement patch for use as port protector for access ports of implantable medical devices such as tissue expanders and breast implants; Ultrasonic and traditional liposuction surgical instruments, namely, ultrasonic consoles, ultrasonic generators, pumps, cannulae, patient positioners, patient compression bandages, and aspiration and irrigation apparatus, tubing, filters, canisters, liners, and parts and fittings therefore

Basis: 1(a)

First Use Date: 1969-00-00

First Use in Commerce Date: 1969-00-00

International Class: 044

Class Status: Active

Providing medical information to physicians and patients regarding breast implant sizing, breast implants, breast reconstruction, facial rejuvenation and cosmetic surgery; Medical consultation services in the field of breast implants, breast reconstruction and cosmetic surgery; medical services in the nature of performing ultrasonic surgical procedures

Basis: 1(a)

First Use Date: 2003-08-00

First Use in Commerce Date: 2003-08-00

ADDITIONAL INFORMATION

Color(s) Claimed: Color is not claimed as a feature of the mark.

Prior Registration Number(s):

1349105
1853450
1941393

MADRID PROTOCOL INFORMATION

USPTO Reference Number: A0011452
International Registration Number: 0983066
International Registration Date: 2008-02-19
Original Filing Date with USPTO: 2008-02-19
International Registration Status: Application For IR Registered By IB
Date of International Registration Status: 2008-12-04
International Registration Renewal Date: 2018-02-19
Irregularity Reply by Date: 2009-05-19

Madrid History:

02-25-2009 - 14:04:40 - Irregularity On Ceasing Of Effect Received From IB
01-15-2009 - 21:00:55 - Partial Ceasing Of Effect Notice Sent To IB
01-15-2009 - 15:13:23 - Ceasing Of Effect Processed
12-23-2008 - 08:00:29 - Partial Ceasing Of Effect To Be Processed
12-05-2008 - 13:29:34 - Application For IR Registered By IB
06-04-2008 - 21:03:17 - Irregularity Response Sent To IB
06-04-2008 - 10:40:22 - Response To Irregularity Reviewed And Accepted
06-03-2008 - 14:51:44 - Irregularity Response Received From Applicant
03-21-2008 - 18:18:23 - Irregularity Notice Received From IB
02-20-2008 - 21:01:30 - IR Certified And Sent To IB
02-20-2008 - 10:17:21 - Manually Certified
02-20-2008 - 05:41:49 - New Application For IR Received

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2008-09-23 - Registered - Principal Register
2008-07-08 - Published for opposition
2008-06-18 - Notice of publication
2008-06-03 - Law Office Publication Review Completed
2008-06-02 - Approved for Pub - Principal Register (Initial exam)
2008-06-02 - Teas/Email Correspondence Entered

2008-06-02 - Communication received from applicant
2008-06-02 - TEAS Response to Office Action Received
2008-05-30 - Combined Examiner's Amendment/Priority Action Entered
2008-05-29 - Assigned To LIE
2008-05-28 - Notification Of Examiner's Amendment/Priority Action E-Mailed
2008-05-28 - Examiner's Amendment/Priority Action E-Mailed
2008-05-28 - Examiners Amendment And/Or Priority Action - Completed
2008-05-22 - Assigned To Examiner
2008-02-15 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

John M. Kim

Correspondent

JOHN M. KIM
IP LEGAL ADVISORS
1940 GARNET AVE STE 230
SAN DIEGO, CA 92109-3576
Phone Number: 858-272-0227
Fax Number: 858-272-0221

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 00:33:57 ET

Serial Number: 78157780 Assignment Information Trademark Document Retrieval

Registration Number: 3068889

Mark (words only): NEKTAR

Standard Character claim: No

Current Status: Registered.

Date of Status: 2006-03-14

Filing Date: 2002-08-26

Transformed into a National Application: No

Registration Date: 2006-03-14

Register: Principal

Law Office Assigned: LAW OFFICE 108

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2006-02-03

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. NEKTAR THERAPEUTICS

Address:

NEKTAR THERAPEUTICS
150 INDUSTRIAL ROAD
SAN CARLOS, CA 94070
United States

Legal Entity Type: Corporation

State or Country of Incorporation: Delaware

GOODS AND/OR SERVICES

International Class: 005

Class Status: Active

Pharmaceuticals, namely, pharmaceutical preparations having enhanced drug performance and/or drug delivery performance for the treatment and/or prophylaxis of diseases or medical conditions such as diabetes, infections, cancers, and inflammations, or of diseases or medical conditions that affect the peripheral nerves, the adrenergic and/or cholinergic receptors, the histamine receptors, the expression and/or regulation of growth factors, the skeletal and/or smooth muscle systems, the cardiovascular system, the endocrine and/or hormone systems, the blood circulatory system, the immunological system, the synoptic and neuroeffector junctional sites, the reproductive system, the skeletal system, the autocoid system, the alimentary and/or excretory systems, and/or the central nervous system

Basis: 1(a)

First Use Date: 2004-06-00

First Use in Commerce Date: 2004-06-00

International Class: 010

Class Status: Active

medical devices, namely, medical apparatus in the nature of a unit for aerosol drug delivery to the deep lung of drugs as fine, dry particles

Basis: 1(a)

First Use Date: 2004-03-00

First Use in Commerce Date: 2004-03-00

ADDITIONAL INFORMATION

(NOT AVAILABLE)

MADRID PROTOCOL INFORMATION

USPTO Reference Number: Z1231867

International Registration Number: 0868634

International Registration Date: 2005-01-03

Original Filing Date with USPTO: 2005-01-03

International Registration Status: Application For IR Registered By IB

Date of International Registration Status: 2005-12-08

International Registration Renewal Date: 2015-01-03

Irregularity Reply by Date: (DATE NOT AVAILABLE)

Madrid History:

02-21-2007 - 10:54:46 - Ceasing Of Effect Reviewed - No Action Required By Office

02-01-2007 - 13:03:33 - Partial Ceasing Of Effect To Be Processed

12-08-2005 - 21:47:54 - Application For IR Registered By IB

01-07-2005 - 07:50:02 - Manually Certified

01-06-2005 - 12:02:03 - New Application For IR Received

USPTO Reference Number: Z1231914

International Registration Number: 0867244

International Registration Date: 2005-03-07

Original Filing Date with USPTO: 2005-03-07

International Registration Status: Application For IR Registered By IB

Date of International Registration Status: 2005-11-24

International Registration Renewal Date: 2015-03-07

Irregularity Reply by Date: (DATE NOT AVAILABLE)

Madrid History:

11-28-2005 - 23:19:10 - Application For IR Registered By IB

03-14-2005 - 10:31:39 - Manually Certified

03-10-2005 - 10:13:28 - New Application For IR Received

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2006-03-14 - Registered - Principal Register

2006-02-02 - Law Office Registration Review Completed

2005-11-04 - Assigned To LIE

2005-10-31 - Allowed for Registration - Principal Register (SOU accepted)

2005-09-28 - Amendment From Applicant Entered

2005-07-29 - Communication received from applicant

2005-07-29 - PAPER RECEIVED

2005-01-27 - NON-FINAL ACTION E-MAILED

2005-01-27 - SU - Non-Final Action - Written

2004-12-13 - Statement of use processing complete

2004-12-13 - Extension 1 granted

2004-11-15 - Amendment to Use filed

2004-11-15 - Extension 1 filed

2004-11-15 - PAPER RECEIVED

2004-07-20 - Noa Mailed - SOU Required From Applicant

2004-04-27 - Published for opposition

2004-04-07 - Notice of publication

2004-02-09 - Approved for Pub - Principal Register (Initial exam)

2003-11-12 - Communication received from applicant

2003-12-11 - Case File In TICRS
2003-11-12 - PAPER RECEIVED
2003-05-07 - Non-final action mailed
2003-04-18 - Assigned To Examiner
2003-04-18 - Assigned To Examiner
2003-01-27 - Applicant amendment prior to exam entered
2003-01-27 - Communication received from applicant
2003-01-27 - PAPER RECEIVED

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Bruce W. Schwab

Correspondent

BRUCE W SCHWAB
TOWNSEND AND TOWNSEND AND CREW LLP
TWO EMBARCADERO CENTER
8TH FLOOR
SAN FRANCISCO CA 94111-3834
Phone Number: 202-942-5737
Fax Number: 202-942-5999

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 00:34:50 ET

Serial Number: 78070685 Assignment Information Trademark Document Retrieval

Registration Number: 2673450

Mark (words only): NEURORECOVERY

Standard Character claim: No

Current Status: Registered.

Date of Status: 2003-01-07

Filing Date: 2001-06-22

Transformed into a National Application: No

Registration Date: 2003-01-07

Register: Supplemental

Law Office Assigned: LAW OFFICE 110

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 40S -Scanning On Demand

Date In Location: 2008-01-15

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. Neurorecovery, Inc.

Address:

Neurorecovery, Inc.
325 Queen City Ave
Tuscaloosa, AL 35401
United States

Legal Entity Type: Corporation

State or Country of Incorporation: Washington

GOODS AND/OR SERVICES

International Class: 005

Class Status: Active

Pharmaceutical preparations for use in the treatment of neurological conditions and injuries

Basis: 1(a)

First Use Date: 1998-12-28

First Use in Commerce Date: 1999-02-01

International Class: 010

Class Status: Active

Medical devices, namely ventricular and intertheecal catheters; valve assemblies, comprised of stopcocks, check-valves, needleless ports, anti-microbial filter, male and female leurlock connectors, and medical tubing for drainage and drug administration for use with osmotic pressure calibration, monitoring; CSF drainage assemblies, comprised of stopcocks, leurlock connectors, anti-microbial filters, calibration tube, drainage tube, and medical tubing for drainage; implantable and external to the body constant delivery and programmable medical pharmaceutical delivery pumps and associated catheter, attachment mesh, medical tubing and anti-microbial filter; insertible guide wires comprising wires ending with infra-red locator, radiological emitting, light treatment, and pressure sensing tips; and specialized rotating y-valve and medical tubing for the introduction of adult cells, reconstructive substrate, vectors and pharmaceuticals for use in clinical and medical procedures

Basis: 1(a)

First Use Date: 1999-12-18

First Use in Commerce Date: 2000-06-01

ADDITIONAL INFORMATION

(NOT AVAILABLE)

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2008-01-15 - Case File In TICRS

2004-12-06 - Attorney Revoked And/Or Appointed

2004-12-06 - TEAS Revoke/Appoint Attorney Received

2003-01-07 - Registered - Supplemental Register

2002-11-06 - APPROVED FOR REGISTRATION SUPPLEMENTAL REGISTER

2002-11-06 - Amendment to Use approved

2002-11-01 - Amendment to use processing complete

2002-10-21 - Amendment to Use filed

2002-10-29 - Communication received from applicant
2002-10-21 - TEAS Amendment of Use Received
2002-10-09 - Assigned To Examiner
2002-09-30 - Non-final action mailed
2002-08-12 - Communication received from applicant
2002-08-19 - Communication received from applicant
2002-08-12 - Continuation of final refusal mailed
2002-07-08 - Communication received from applicant
2002-07-07 - Communication received from applicant
2002-07-01 - Non-final action mailed
2002-06-18 - Previous allowance count withdrawn
2002-05-23 - Approved for Pub - Principal Register (Initial exam)
2002-05-01 - Previous allowance count withdrawn
2002-03-30 - Approved for Pub - Principal Register (Initial exam)
2002-03-21 - Communication received from applicant
2002-02-21 - Communication received from applicant
2002-02-15 - Continuation of final refusal mailed
2001-12-10 - Communication received from applicant
2001-11-26 - Final refusal mailed
2001-10-09 - Communication received from applicant
2001-10-09 - Communication received from applicant
2001-09-21 - Non-final action mailed
2001-08-30 - Assigned To Examiner

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

CHRISTINE R. STRONG

Correspondent

CHRISTINE R. STRONG
MAYNARD, COOPER & GALE, P.C.
1901 SIXTH AVENUE NORTH 2400 AMSOUTH/HAR
BIRMINGHAM AL 35203
Phone Number: 205-254-1000
Fax Number: 205-254-1999

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 00:35:30 ET

Serial Number: 77007644 Assignment Information Trademark Document Retrieval

Registration Number: 3315472

Mark



Standard Character claim: No

Current Status: Registered.

Date of Status: 2007-10-23

Filing Date: 2006-09-26

Transformed into a National Application: No

Registration Date: 2007-10-23

Register: Principal

Law Office Assigned: LAW OFFICE 112

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2007-10-23

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. Pfizer Health AB

Address:

Pfizer Health AB
Lindhagensgatan 100, SE-11287
Stockholm
Sweden

Legal Entity Type: Corporation
State or Country of Incorporation: Sweden
Phone Number: 212-733-9778
Fax Number: 212-573-2273

GOODS AND/OR SERVICES

International Class: 005
Class Status: Active
Pharmaceutical preparations, namely, human growth hormones
Basis: 1(a)
First Use Date: 1996-00-00
First Use in Commerce Date: 1996-00-00

International Class: 010
Class Status: Active
Medical devices for injecting pharmaceutical preparations, and parts and fittings therefor; unfilled syringes and ampoules
Basis: 1(a)
First Use Date: 1996-00-00
First Use in Commerce Date: 1996-00-00

International Class: 016
Class Status: Active
Printed material, namely, pamphlets, brochures, booklets, manuals and leaflets related to human growth hormone therapy
Basis: 1(a)
First Use Date: 1996-00-00
First Use in Commerce Date: 1996-00-00

International Class: 044
Class Status: Active
Health information services, namely, providing information on topics of human growth hormone therapy, diagnosis and treatment of growth hormone therapy, and dosing options of pharmaceuticals for growth hormone therapy
Basis: 1(a)
First Use Date: 1996-00-00
First Use in Commerce Date: 1996-00-00

ADDITIONAL INFORMATION

Description of Mark: The mark consists of design of three sails.

Lining and Stippling: The stippling is for shading purposes only.

Design Search Code(s):

18.11.25 - Battery carrier trays for automobiles; Belts, safety, vehicle; Brakes (automobile); Car seats, baby; Clutches, vehicles; Gear shifts, vehicle; Grills (automobile); Head lights, vehicle; Hitches, (trailers); Horns (vehicular); Jacks (vehicle); Kick stands (bicycle); License plates; Lights, auto; Lights,

bicycle; Mirrors, vehicle; Pedals (vehicular); Porthole; Racks, (automobile); Radiators, vehicle; Sails; Seat belts, vehicle; Stick shifts (automobile); Windshields (vehicular)

25.03.05 - Backgrounds covered with dots; Dotted backgrounds

26.11.20 - Rectangles inside one another

26.11.21 - Rectangles that are completely or partially shaded

26.11.25 - Rectangles with one or more curved sides

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2007-10-23 - Registered - Principal Register

2007-08-07 - Published for opposition

2007-07-18 - Notice of publication

2007-05-17 - Law Office Publication Review Completed

2007-05-17 - Approved for Pub - Principal Register (Initial exam)

2007-04-24 - Teas/Email Correspondence Entered

2007-04-24 - Communication received from applicant

2007-04-24 - Assigned To LIE

2007-03-22 - TEAS Response to Office Action Received

2006-12-28 - Non-final action e-mailed

2006-12-28 - Non-Final Action Written

2006-12-27 - Assigned To Examiner

2006-10-03 - Notice Of Design Search Code Mailed

2006-10-02 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Matthew Pater

Correspondent

MATTHEW PATER

PFIZER INC.

150 E 42ND ST

NEW YORK, NY 10017-5612

Phone Number: 212-733-9778

Fax Number: 212-573-2273

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 00:36:08 ET

Serial Number: 78309908 Assignment Information Trademark Document Retrieval

Registration Number: 3181507

Mark (words only): JUST THINK OF THE POSSIBILITIES!

Standard Character claim: No

Current Status: Registered.

Date of Status: 2006-12-05

Filing Date: 2003-10-06

Transformed into a National Application: No

Registration Date: 2006-12-05

Register: Principal

Law Office Assigned: LAW OFFICE 113

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2006-10-30

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. The TapeMark Company

Address:

The TapeMark Company
1685 Marthaler Lane
West St. Paul, MN 55118
United States

Legal Entity Type: Corporation

State or Country of Incorporation: Minnesota

GOODS AND/OR SERVICES

International Class: 003

Class Status: Active

Non-medicated oral care dissolving strips for breath freshening, dental bleaching and oral hygiene; skin moisturizing and revitalizing masks and moisturizing and revitalizing eye patches

Basis: 1(a)

First Use Date: 2003-05-08

First Use in Commerce Date: 2003-05-08

International Class: 005

Class Status: Active

Topical delivery agents, namely, transdermal drug delivery patches, soluble films, and hydrogel patches for providing controlled or continuous release of a drug, vitamins, or therapeutic agents sold as a component of pharmaceutical preparations; medical diagnostic strips used to monitor or test blood glucose levels or the presence or absence of chemicals and/or biologics in the blood, urine, saliva, and mucous

Basis: 1(a)

First Use Date: 1994-02-01

First Use in Commerce Date: 1994-02-01

International Class: 010

Class Status: Active

Transdermal drug delivery patches sold without therapeutic agents or drugs; soluble films for delivery of pharmaceuticals sold without therapeutic agents or drugs, non-medicated hydrogel delivery systems for delivery and controlled release of active non-medicated ingredients to the skin's surface; nasal dilators; adhesive strips for holding medical devices to the skin

Basis: 1(a)

First Use Date: 1994-02-01

First Use in Commerce Date: 1994-02-01

International Class: 040

Class Status: Active

Manufacture to the order and/or specification of others soluble films for use in confectionary products, oral care products, delivery of pharmaceuticals, and cosmetic applications; manufacture to the order and/or specification of others packaging; manufacture to the order and/or specification of others pressure sensitive labels, microfragrances, print receptive coatings, conductive coatings, hydrophilic coatings, hydrophobic coatings, patterned adhesives and coatings, skin contact adhesives, precision liquid dispensers, facial masks, eye patches, breath fresheners, oral care strips, spot treatments for acne, disposable soap/cleanser sheets, aromatherapy products, cosmeceutical patches, transdermal drug delivery patches; laminating of pressure sensitive and non-pressure sensitive adhesive materials, including tapes, foams, films, foils, non-wovens, membranes, filter media, paper, hydrocolloids and gels; printing services; and custom steel rolling and fabrication to the order and specification of others

Basis: 1(a)

First Use Date: 1994-02-01

First Use in Commerce Date: 1994-02-01

ADDITIONAL INFORMATION

Prior Registration Number(s):

1910470

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2006-12-05 - Registered - Principal Register

2006-10-26 - Law Office Registration Review Completed

2006-10-24 - Assigned To LIE

2006-10-11 - Allowed for Registration - Principal Register (SOU accepted)

2006-09-25 - Amendment From Applicant Entered

2006-09-15 - Communication received from applicant

2006-09-15 - PAPER RECEIVED

2006-07-21 - Non-final action mailed

2006-07-21 - SU - Non-Final Action - Written

2006-06-20 - Statement of use processing complete

2006-04-18 - Amendment to Use filed

2006-04-18 - TEAS Statement of Use Received

2005-10-19 - Extension 1 granted

2005-10-19 - Extension 1 filed

2005-10-19 - TEAS Extension Received

2005-04-19 - Noa Mailed - SOU Required From Applicant

2005-01-25 - Published for opposition

2005-01-05 - Notice of publication

2004-11-23 - Law Office Publication Review Completed

2004-11-22 - Assigned To LIE

2004-11-08 - Approved for Pub - Principal Register (Initial exam)

2004-11-05 - Amendment From Applicant Entered
2004-10-18 - Communication received from applicant
2004-10-18 - PAPER RECEIVED
2004-04-21 - Non-final action mailed
2004-04-15 - Assigned To Examiner

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Scott W. Johnston

Correspondent

Scott W. Johnston
MERCHANT & GOULD P.C.
P.O. Box 2910
Minneapolis, MN 55402-9944
Phone Number: (612) 332-5300
Fax Number: (612) 332-9081

Attachment 10

**Sample of U.S. Trademark Registrations Owned
by Johnson & Johnson in International Classes 5 and 10**

Mark	Goods in Classes 5 and 10
ONETOUCH SELECT , U.S. Reg. No. 3,651,557, registered 7/7/2009	Test strips for use with blood glucose monitoring devices; control solutions in the nature of diagnostic preparations for use with blood glucose monitoring devices, in Class 5 Blood glucose monitoring devices, in Class 10
ULTRA , U.S. Reg. No. 3,642,309, registered 6/23/2009	Test strips and control solutions for use in glucose monitoring, in Class 5 Blood glucose monitors, in Class 10
Design Mark , U.S. Reg. No. 3,642,165, registered 6/23/2009	Antibiotics used to treat periodontal disease, in Class 5 Medication dispensing apparatus in the nature of disposable cartridges, in Class 10
K-Y & Design , U.S. Reg. No. 3,491,502, registered 8/26/2008	Personal lubricant, in Class 5 Massage apparatus, namely, non-electric body massager, in Class 20
ULTRAMINI , U.S. Reg. No. 3,442,347, registered 6/3/2008	Test strips for blood glucose monitoring devices, in Class 5 Blood glucose monitoring devices, in Class 10
ONETOUCH ULTRA & Design , U.S. Reg. No. 3,436,618, registered 5/27/2008	Test strips for blood glucose monitoring devices, in Class 5 Blood glucose monitoring devices, in Class 10
JOHNSON & JOHNSON WOUND MANAGEMENT & Design , U.S. Reg. No. 3,427,289, registered 5/13/2008	Pharmaceutical preparation for use in halting blood flow in surgical and medical procedures; pharmaceutical, namely, a wound healing growth factor; wound dressings and skin wound bandages; and surgical anti-microbial dressings, in Class 5; Surgical sponges and hemostats, in Class 10
ONETOUCH ULTRAMINI & Design , U.S. Reg. No. 3,405,923, registered 4/1/2008	Test strips for blood glucose monitoring devices, in Class 5 Blood glucose monitoring devices, in Class 10
ONETOUCH ULTRAMINI & Design , U.S. Reg. No. 3,402,295, registered 3/25/2008	Test strips for blood glucose monitoring devices, in Class 5 Blood glucose monitoring devices, in Class 10

Mark	Goods in Classes 5 and 10
IMMUNICON , U.S. Reg. No. 3,132,519, registered 8/22/2006	<p>Clinical medical reagents; diagnostic preparations for clinical or medical laboratory use; diagnostic preparations for medical and veterinary use; diagnostic preparations for medical or veterinary purposes; diagnostic reagents for clinical or medical laboratory use; diagnostic reagents for in vitro use in biochemistry, clinical chemistry and microbiology; diagnostic reagents for medicinal use; medical diagnostic reagents; medical diagnostic reagents and assays for testing of body fluids; nucleic acid sequences and chemical reagents for medical and veterinary purposes; preparations for detecting genetic predispositions for medical purposes; reagents and media for medical and veterinary diagnostic purposes; reagents for medical use, in Class 5</p> <p>Electromagnetic medical diagnostic imaging apparatus; magnets for medical purposes; medical apparatus for diagnosing suspected heart attacks; medical instrument for cardiovascular diagnostics, in Class 10</p>
ONETOUCH , U.S. Reg. No. 2,863,393, registered 7/13/2004	<p>Test strips used for blood glucose monitoring devices, in Class 5</p> <p>Blood glucose monitoring devices and parts and attachments therefor, in Class 10</p>
ORTHO-CLINICAL DIAGNOSTICS & Design , U.S. Reg. No. 2,565,565, registered 4/30/2002	<p>In-vitro medical diagnostic reagents, in Class 5</p> <p>In-vitro diagnostic instruments, namely, hematology and blood analyzers, and anti-body screening and blood typing apparatuses, to be used for clinical diagnostic purposes in the area of clinical chemistry analysis, blood bank analysis, immunodiagnostics, viral screening, and nucleic acid diagnostics, in Class 10</p>
THE POWER TO HEAL , U.S. Reg. No. 2,217,508, registered 1/12/1999	<p>Bandages and dressings for skin wounds, in Class 5</p> <p>Surgical sponges and surgical/medical gloves, in Class 10</p>
VITROS , U.S. Reg. No. 2,126,793, registered 1/6/1998	<p>Chemical reagents for medical in vivo diagnostic tests, in Class 5</p> <p>Medical equipment, namely, chemistry analyzer apparatus used to generate diagnostic test results from blood and other body fluids by professionals in hospitals, laboratories, clinics and doctors' offices, in Class 10</p>
ASP ADVANCED STERILIZATION PRODUCTS & Design , U.S. Reg. No. 1,979,282, registered 6/11/1996	<p>General purpose sterilants for sterilizing medical instruments; sterilization indicators comprising indicator strips, indicator tapes, and biological test packs for indicating sterility, in Class 5</p> <p>Pouches for holding medical equipment during and after sterilization; sterilization units for medical instruments, in Class 10</p>
ASP & Design , U.S. Reg. No. 1,948,448, registered 1/16/1996	<p>General purpose sterilants for sterilizing medical instruments; sterilization indicators comprising indicator strips, indicator tapes, and biological test packs for indicating sterility, in Class 5</p> <p>Pouches for holding medical equipment during and after sterilization; sterilization system, namely a sterilizing unit to sterilize medical and surgical equipment, and parts therefor, in Class 10</p>
ONE TOUCH , U.S. Reg. No. 1,484,999, registered 4/19/1988	<p>In vitro diagnostic reagent test strips used by diabetics to test their blood glucose levels, in Class 5</p> <p>Hand-held diagnostic blood testing device used by diabetics to test their blood glucose levels, in Class 10</p>

Mark	Goods in Classes 5 and 10
JOHNSON & JOHNSON in Stylized Letters , U.S. Reg. No. 1,477,368, registered 2/23/1988	Sports adhesive tape and blister dressings, in Class 5 Elastic bandages. In Class 10
CODMAN , U.S. Reg. No. 840,934, registered 12/19/1967	Surgical implants – namely, plates, wire mesh, clips, foil, shunt valves, wires, pins, screws, nails, burr hole buttons, cranioplastic kits, and aneuroplastic kits, in U.S. Class 44
ETHILON , U.S. Reg. No. 616,629, registered 11/22/1955	Sutures and ligatures, in U.S. Class 44
ETHICON in Stylized Letters , U.S. Reg. No. 599,432, registered 12/14/1954	Sutures and ligatures; cotton, gauze, linen, wire and silk for surgical use; fascia lata; hemostasis and other clips for surgical purposes; thread, and wire for dental, gynecological, obstetrical, pharmaceutical, surgical and veterinary use; and umbilical tape, and surgical containers of all types for these products, in U.S. Class
JOHNSON & JOHNSON in Stylized Letters , U.S. Reg. No. 568,161, registered 12/23/1952	Absorbent and impregnated cellulose for dental, medical, surgical, and veterinary use; absorbent and nonabsorbent cotton; adhesive bandages in strip and roll form for dental, medical, surgical, and veterinary use; specially prepared, pure adhesives for use on human beings and animals; adhesive tape for dental, medical, surgical, and veterinary use; adhesive tape dispensers for dental, medical, surgical, and veterinary use; bandage rolls for dental, medical, surgical, and veterinary use; cotton-tipped applicators; cotton buds; cotton wadding for dental, medical, surgical, and veterinary use; covers for dental brackets; delivery kits comprising dressings for medical, surgical, and veterinary use, with pins and similar accessories; dental floss and tape; disposable, flexible, and foldable waste receivers for dental, medical, surgical, and veterinary use, as on the dentist's table in the treatment of patients for the handling and disposal of surgical supplies; emergency kits comprising surgical dressings, bandages, adhesive bandages, gauze, adhesive tape, cotton, splints, finger cots, tourniquets, tongue depressors, antiseptics, ointments, inhalants, ammonia, iodine, bicarbonate of soda, petrolatum, castor oil, lotion, first aid booklets and charts, scissors, tweezers, drinking cups, and medicine glasses (graduated); face masks for dental, medical, surgical, and veterinary use; gauze in roll, strip, folded, or loose form for dental, medical, surgical, and veterinary use; unmedicated plasters for dental, medical, surgical, and veterinary use; sanitary napkins and obstetric pads; splints; surgical dressings and sponges; tongue depressors; and wood applicators for dental, medical, surgical, and veterinary use; operating room masks and caps, in U.S. Class 44
SPECIALIST, in Stylized Letters , U.S. Reg. No. 526,580, registered 6/20/1950	Splints and bandages, in sheet, roll and strip form, for medical and surgical uses, in U.S. Class 44

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 00:59:58 ET

Serial Number: 76685065 [Assignment Information](#) [Trademark Document Retrieval](#)

Registration Number: 3651557

Mark

ONETOUCH SELECT

(words only): ONETOUCH SELECT

Standard Character claim: Yes

Current Status: Registered.

Date of Status: 2009-07-07

Filing Date: 2007-12-17

Transformed into a National Application: No

Registration Date: 2009-07-07

Register: Principal

Law Office Assigned: LAW OFFICE 110

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2009-06-02

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. JOHNSON & JOHNSON

Address:

JOHNSON & JOHNSON
One Johnson & Johnson Plaza
New Brunswick, NJ 089337001
United States

Legal Entity Type: Corporation

State or Country of Incorporation: New Jersey

Phone Number: (732) 524-2281

GOODS AND/OR SERVICES

International Class: 005

Class Status: Active

Test strips for use with blood glucose monitoring devices; control solutions in the nature of diagnostic preparations for use with blood glucose monitoring devices

Basis: 1(a)

First Use Date: 2009-03-28

First Use in Commerce Date: 2009-03-28

International Class: 010

Class Status: Active

blood glucose monitoring devices

Basis: 1(a)

First Use Date: 2009-03-28

First Use in Commerce Date: 2009-03-28

ADDITIONAL INFORMATION

Prior Registration Number(s):

1484999

2631514

2863393

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2009-07-07 - Registered - Principal Register

2009-06-02 - Law Office Registration Review Completed

2009-06-02 - Allowed for Registration - Principal Register (SOU accepted)

2009-05-20 - Statement of use processing complete

2009-05-04 - Amendment to Use filed

2009-05-20 - Case Assigned To Intent To Use Paralegal

2009-05-04 - TEAS Statement of Use Received

2008-11-04 - Noa Mailed - SOU Required From Applicant

2008-08-12 - Published for opposition

2008-07-23 - Notice of publication
2008-07-10 - Law Office Publication Review Completed
2008-07-10 - Assigned To LIE
2008-07-10 - Approved for Pub - Principal Register (Initial exam)
2008-07-09 - Teas/Email Correspondence Entered
2008-07-09 - Communication received from applicant
2008-07-09 - TEAS Response to Office Action Received
2008-01-29 - Non-final action mailed
2008-01-28 - Non-Final Action Written
2008-01-22 - Assigned To Examiner
2008-01-01 - Application Filing Receipt Mailed
2007-12-27 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record
Laurence S. Rickles

Correspondent
LAURENCE S. RICKLES
Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7001
Phone Number: (732) 524-2281

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 01:03:12 ET

Serial Number: 77510840 Assignment Information Trademark Document Retrieval

Registration Number: 3642309

Mark

ULTRA

(words only): ULTRA

Standard Character claim: Yes

Current Status: Registered.

Date of Status: 2009-06-23

Filing Date: 2008-06-30

Transformed into a National Application: No

Registration Date: 2009-06-23

Register: Principal

Law Office Assigned: LAW OFFICE 117

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2009-06-23

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. Johnson & Johnson

Address:

Johnson & Johnson
One Johnson & Johnson Plaza

New Brunswick, NJ 089337001
United States
Legal Entity Type: Corporation
State or Country of Incorporation: New Jersey
Phone Number: 732-524-2281
Fax Number: 732-524-6341

GOODS AND/OR SERVICES

International Class: 005
Class Status: Active
test strips and control solutions for use in glucose monitoring
Basis: 1(a)
First Use Date: 2001-01-15
First Use in Commerce Date: 2001-01-15

International Class: 010
Class Status: Active
blood glucose monitors
Basis: 1(a)
First Use Date: 2001-01-15
First Use in Commerce Date: 2001-01-15

ADDITIONAL INFORMATION

Prior Registration Number(s):
2538658
2730626
3402295

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2009-06-23 - Registered - Principal Register
2009-04-07 - Published for opposition
2009-03-18 - Notice of publication
2009-03-04 - Law Office Publication Review Completed
2009-03-04 - Assigned To LIE

2009-02-28 - Approved for Pub - Principal Register (Initial exam)

2009-02-27 - Teas/Email Correspondence Entered

2009-02-27 - Communication received from applicant

2009-02-27 - TEAS Response to Office Action Received

2008-09-29 - Non-final action mailed

2008-09-27 - Non-Final Action Written

2008-09-26 - Assigned To Examiner

2008-07-03 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Laurence S. Rickles

Correspondent

LAURENCE S. RICKLES
JOHNSON & JOHNSON
1 JOHNSON AND JOHNSON PLZ
NEW BRUNSWICK, NJ 08933-0002
Phone Number: 732-524-2281
Fax Number: 732-524-6341

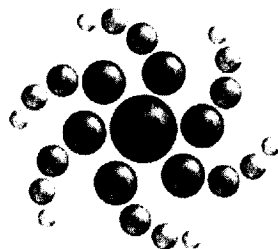
Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 01:03:44 ET

Serial Number: 77477598 Assignment Information Trademark Document Retrieval

Registration Number: 3642165

Mark



Standard Character claim: No

Current Status: Registered.

Date of Status: 2009-06-23

Filing Date: 2008-05-19

Transformed into a National Application: No

Registration Date: 2009-06-23

Register: Principal

Law Office Assigned: LAW OFFICE 107

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2009-06-23

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. Johnson & Johnson

Address:

Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 089337001
United States

Legal Entity Type: Corporation
State or Country of Incorporation: New Jersey
Phone Number: 732-524-1987
Fax Number: 732-524-6341

GOODS AND/OR SERVICES

International Class: 005
Class Status: Active
antibiotics used to treat periodontal disease
Basis: 1(a)
First Use Date: 2001-04-02
First Use in Commerce Date: 2001-04-02

International Class: 010
Class Status: Active
medication dispensing apparatus in the nature of disposable cartridges
Basis: 1(a)
First Use Date: 2001-04-02
First Use in Commerce Date: 2001-04-02

ADDITIONAL INFORMATION

Color(s) Claimed: Color is not claimed as a feature of the mark.

Description of Mark: The mark consists of different size balls appearing in a pinwheel fashion.

Design Search Code(s):

26.01.11 - Circles comprised of animals; Circles comprised of geometric figures; Circles comprised of humans; Circles comprised of letters or numerals; Circles comprised of plants; Circles comprised of punctuation; Letters, numerals, punctuation, geometric figures, objects, humans, plants or animals comprising a circle
26.01.21 - Circles that are totally or partially shaded.
26.01.26 - Coils; Spirals; Swirls
26.01.31 - Circles - five or more; Five or more circles

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2009-06-23 - Registered - Principal Register

2009-04-07 - Published for opposition

2009-03-18 - Notice of publication
2009-02-27 - Law Office Publication Review Completed
2009-02-27 - Assigned To LIE
2009-02-25 - Approved for Pub - Principal Register (Initial exam)
2009-02-24 - Teas/Email Correspondence Entered
2009-02-24 - Communication received from applicant
2009-02-24 - TEAS Response to Office Action Received
2008-09-08 - Non-final action mailed
2008-09-08 - Non-Final Action Written
2008-09-04 - Assigned To Examiner
2008-05-23 - Notice Of Design Search Code Mailed
2008-05-22 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Jake D. Feldman

Correspondent

JAKE D. FELDMAN
JOHNSON & JOHNSON
1 JOHNSON AND JOHNSON PLZ
NEW BRUNSWICK, NJ 08933-0002
Phone Number: 732-524-1987
Fax Number: 732-524-6341

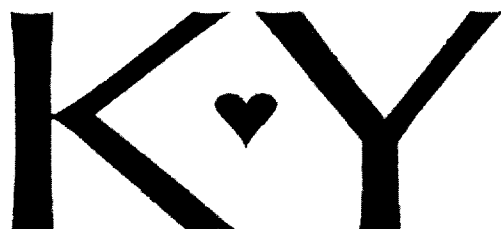
Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 01:04:16 ET

Serial Number: 77250981 Assignment Information Trademark Document Retrieval

Registration Number: 3491502

Mark



(words only): K-Y

Standard Character claim: No

Current Status: Registered.

Date of Status: 2008-08-26

Filing Date: 2007-08-09

Transformed into a National Application: No

Registration Date: 2008-08-26

Register: Principal

Law Office Assigned: LAW OFFICE 103

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2008-08-26

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. Johnson & Johnson

Address:

Johnson & Johnson
One Johnson & Johnson Plaza

New Brunswick, NJ 089337001
United States
Legal Entity Type: Corporation
State or Country of Incorporation: New Jersey
Phone Number: 732-524-2281
Fax Number: 732-524-6341

GOODS AND/OR SERVICES

International Class: 003
Class Status: Active
massage oil and body wash
Basis: 1(a)
First Use Date: 2007-01-08
First Use in Commerce Date: 2007-01-08

International Class: 005
Class Status: Active
personal lubricant
Basis: 1(a)
First Use Date: 2007-01-08
First Use in Commerce Date: 2007-01-08

International Class: 010
Class Status: Active
massage apparatus, namely, non-electric body massager
Basis: 1(a)
First Use Date: 2007-01-08
First Use in Commerce Date: 2007-01-08

ADDITIONAL INFORMATION

Color(s) Claimed: Color is not claimed as a feature of the mark.

Description of Mark: The mark consists of The mark is "K-Y" with a heart design used as the hyphen.

Design Search Code(s):
02.11.01 - Hearts excluding hearts as carriers or depicted on playing cards
27.03.05 - Objects forming letters or numerals

Prior Registration Number(s):
54124
2285313

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2008-08-26 - Registered - Principal Register
2008-06-10 - Published for opposition
2008-05-21 - Notice of publication
2008-05-08 - Law Office Publication Review Completed
2008-05-08 - Approved for Pub - Principal Register (Initial exam)
2008-05-02 - Amendment From Applicant Entered
2008-05-02 - Communication received from applicant
2008-05-02 - Assigned To LIE
2008-04-30 - PAPER RECEIVED
2007-10-30 - Non-final action mailed
2007-10-30 - Non-Final Action Written
2007-10-11 - Assigned To Examiner
2007-08-15 - Notice Of Design Search Code Mailed
2007-08-14 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Laurence S. Rickles

Correspondent

LAURENCE S. RICKLES
JOHNSON & JOHNSON
ONE JOHNSON & JOHNSON PLAZA
NEW BRUNSWICK, NJ 08933-7001
Phone Number: 732-524-2281
Fax Number: 732-524-6341

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 01:04:49 ET

Serial Number: 78647304 Assignment Information Trademark Document Retrieval

Registration Number: 3442347

Mark

ULTRAMINI

(words only): ULTRAMINI

Standard Character claim: Yes

Current Status: Registered.

Date of Status: 2008-06-03

Filing Date: 2005-06-09

Transformed into a National Application: No

Registration Date: 2008-06-03

Register: Principal

Law Office Assigned: LAW OFFICE 109

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2008-04-25

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. Johnson & Johnson

Address:

Johnson & Johnson
One Johnson & Johnson Plaza

New Brunswick, NJ 089337001
United States
Legal Entity Type: Corporation
State or Country of Incorporation: New Jersey
Phone Number: 732-524-2281
Fax Number: 732-524-6341

GOODS AND/OR SERVICES

International Class: 005
Class Status: Active
TEST STRIPS FOR BLOOD GLUCOSE MONITORING DEVICES
Basis: 1(a)
First Use Date: 2006-09-07
First Use in Commerce Date: 2006-09-07

International Class: 010
Class Status: Active
BLOOD GLUCOSE MONITORING DEVICES
Basis: 1(a)
First Use Date: 2006-09-07
First Use in Commerce Date: 2006-09-07

ADDITIONAL INFORMATION

Prior Registration Number(s):
2538364
2730625
2730626

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2008-06-03 - Registered - Principal Register
2008-04-25 - Law Office Registration Review Completed
2008-04-24 - Allowed for Registration - Principal Register (SOU accepted)
2008-04-02 - Amendment From Applicant Entered
2008-04-02 - Communication received from applicant

2008-04-02 - Assigned To LIE
2008-03-27 - PAPER RECEIVED
2007-09-24 - Non-final action mailed
2007-09-22 - SU - Non-Final Action - Written
2007-08-29 - Statement of use processing complete
2007-07-25 - Amendment to Use filed
2007-07-25 - PAPER RECEIVED
2007-07-02 - Extension 1 granted
2007-07-02 - Extension 1 filed
2007-07-02 - TEAS Extension Received
2007-01-02 - Noa Mailed - SOU Required From Applicant
2006-10-10 - Published for opposition
2006-09-20 - Notice of publication
2006-08-28 - Law Office Publication Review Completed
2006-08-18 - Assigned To LIE
2006-08-09 - Approved for Pub - Principal Register (Initial exam)
2006-07-21 - Amendment From Applicant Entered
2006-07-05 - Communication received from applicant
2006-07-05 - PAPER RECEIVED
2006-01-04 - Non-final action mailed
2006-01-04 - Non-Final Action Written
2005-12-29 - Assigned To Examiner
2005-06-14 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Laurence S. Rickles

Correspondent

LAURENCE S. RICKLES
JOHNSON & JOHNSON
ONE JOHNSON & JOHNSON PLAZA
NEW BRUNSWICK, NJ 08933-7001
Phone Number: 732-524-2281
Fax Number: 732-524-6341

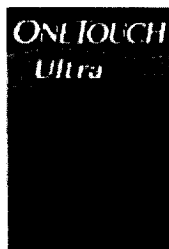
Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 01:05:23 ET

Serial Number: 76661414 Assignment Information Trademark Document Retrieval

Registration Number: 3436618

Mark



(words only): ONETOUCH ULTRA

Standard Character claim: No

Current Status: Registered.

Date of Status: 2008-05-27

Filing Date: 2006-06-12

Transformed into a National Application: No

Registration Date: 2008-05-27

Register: Principal

Law Office Assigned: LAW OFFICE 107

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2008-04-23

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. JOHNSON & JOHNSON

Address:

JOHNSON & JOHNSON
One Johnson & Johnson Plaza

New Brunswick, NJ 089337001
United States
Legal Entity Type: Corporation
State or Country of Incorporation: New Jersey
Phone Number: (732) 524-2281

GOODS AND/OR SERVICES

International Class: 005
Class Status: Active
Test strips for blood glucose monitoring devices
Basis: 1(a)
First Use Date: 2006-00-00
First Use in Commerce Date: 2006-00-00

International Class: 010
Class Status: Active
blood glucose monitoring devices
Basis: 1(a)
First Use Date: 2006-00-00
First Use in Commerce Date: 2006-00-00

ADDITIONAL INFORMATION

Color(s) Claimed: The color(s) dark blue, lavender, light blue, and white is/are claimed as a feature of the mark.

Description of Mark: The mark consists of the wording "ONETOUCH" and "ULTRA" appear in white, the wavy band appears in lavender, the background above the wavy band appears in dark blue, and the background below the wavy band appears in light blue.

Design Search Code(s):
26.11.21 - Rectangles that are completely or partially shaded
26.17.02 - Bands, wavy; Bars, wavy; Lines, wavy; Wavy line(s), band(s) or bar(s)

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2008-05-27 - Registered - Principal Register

2008-04-23 - Law Office Registration Review Completed

2008-04-22 - Assigned To LIE
2008-04-21 - Allowed for Registration - Principal Register (SOU accepted)
2008-04-01 - Statement of use processing complete
2008-03-13 - Amendment to Use filed
2008-03-13 - TEAS Statement of Use Received
2007-09-13 - Extension 1 granted
2007-09-13 - Extension 1 filed
2007-09-13 - TEAS Extension Received
2007-03-20 - Noa Mailed - SOU Required From Applicant
2006-12-26 - Published for opposition
2006-12-06 - Notice of publication
2006-11-02 - Law Office Publication Review Completed
2006-10-27 - Assigned To LIE
2006-10-23 - Approved for Pub - Principal Register (Initial exam)
2006-10-20 - Teas/Email Correspondence Entered
2006-10-12 - Communication received from applicant
2006-10-12 - TEAS Response to Office Action Received
2006-09-25 - Priority Action Mailed
2006-09-25 - Priority Action Written
2006-09-17 - Assigned To Examiner
2006-06-20 - Application Filing Receipt Mailed
2006-06-16 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Laurence S. Rickles

Correspondent

Laurence S. Rickles
JOHNSON & JOHNSON
ONE JOHNSON & JOHNSON PLAZA
NEW BRUNSWICK NJ 08933-7001
Phone Number: (732) 524-2281

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This page was generated by the TARR system on 2009-08-05 01:06:06 ET

Serial Number: 76622147 Assignment Information Trademark Document Retrieval

Registration Number: 3427289

Mark



(words only): JOHNSON & JOHNSON WOUND MANAGEMENT

Standard Character claim: No

Current Status: Registered.

Date of Status: 2008-05-13

Filing Date: 2004-11-26

Transformed into a National Application: No

Registration Date: 2008-05-13

Register: Principal

Law Office Assigned: LAW OFFICE 101

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2008-04-04

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. JOHNSON & JOHNSON

Address:

JOHNSON & JOHNSON
One Johnson & Johnson Plaza

New Brunswick, NJ 089337001
United States
Legal Entity Type: Corporation
State or Country of Incorporation: New Jersey
Phone Number: (732) 524-2844

GOODS AND/OR SERVICES

International Class: 005

Class Status: Active

pharmaceutical preparation for use in halting blood flow in surgical and medical procedures;
pharmaceutical, namely, a wound healing growth factor; wound dressings and skin wound bandages;
and surgical anti-microbial dressings

Basis: 1(a)

First Use Date: 2006-00-00

First Use in Commerce Date: 2006-00-00

International Class: 010

Class Status: Active

surgical sponges and hemostats

Basis: 1(a)

First Use Date: 2006-00-00

First Use in Commerce Date: 2006-00-00

ADDITIONAL INFORMATION

Color(s) Claimed: Color is not claimed as a feature of the mark.

Disclaimer: "WOUND MANAGEMENT"

Design Search Code(s):

01.09.05 - Atomic models; Molecular models

26.07.21 - Diamonds that are completely or partially shaded

26.07.28 - Diamond shapes (miscellaneous overall shape); Miscellaneous designs with overall diamond shape, including letters forming or comprising a diamond

26.19.01 - Spheres (geometric)

Prior Registration Number(s):

568161

648450

2402353

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2008-05-13 - Registered - Principal Register

2008-04-04 - Law Office Registration Review Completed

2008-04-04 - Allowed for Registration - Principal Register (SOU accepted)

2008-03-06 - Amendment From Applicant Entered

2008-03-06 - Communication received from applicant

2008-03-06 - Assigned To LIE

2008-02-11 - PAPER RECEIVED

2008-01-08 - Assigned To Examiner

2007-08-08 - Non-final action mailed

2007-08-07 - SU - Non-Final Action - Written

2007-08-06 - Statement of use processing complete

2007-06-05 - Amendment to Use filed

2007-06-05 - TEAS Statement of Use Received

2006-12-05 - Extension 1 granted

2006-12-05 - Extension 1 filed

2006-12-05 - TEAS Extension Received

2006-06-06 - Noa Mailed - SOU Required From Applicant

2006-03-14 - Published for opposition

2006-02-22 - Notice of publication

2006-02-02 - Law Office Publication Review Completed

2006-02-01 - Assigned To LIE

2006-01-13 - Assigned To LIE

2006-01-04 - Approved for Pub - Principal Register (Initial exam)

2006-01-04 - Teas/Email Correspondence Entered

2005-12-22 - Communication received from applicant
2005-12-22 - TEAS Response to Office Action Received
2005-07-01 - Non-final action mailed
2005-07-01 - Non-Final Action Written
2005-06-29 - Assigned To Examiner
2004-12-10 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Michael J. Ryan, Jr.

Correspondent

MICHAEL J. RYAN, JR.
JOHNSON & JOHNSON
ONE JOHNSON & JOHNSON PLAZA
NEW BRUNSWICK, NEW JERSEY 08933-7001
Phone Number: (732) 524-2844

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This page was generated by the TARR system on 2009-08-05 01:07:00 ET

Serial Number: 76661411 Assignment Information Trademark Document Retrieval

Registration Number: 3405923

Mark



(words only): ONETOUCH ULTRAMINI

Standard Character claim: No

Current Status: Registered.

Date of Status: 2008-04-01

Filing Date: 2006-06-12

Transformed into a National Application: No

Registration Date: 2008-04-01

Register: Principal

Law Office Assigned: LAW OFFICE 107

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2008-02-27

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. JOHNSON & JOHNSON

Address:

JOHNSON & JOHNSON
One Johnson & Johnson Plaza

New Brunswick, NJ 089337001
United States
Legal Entity Type: Corporation
State or Country of Incorporation: New Jersey
Phone Number: (732) 524-2281

GOODS AND/OR SERVICES

International Class: 005
Class Status: Active
Test strips for blood glucose monitoring devices
Basis: 1(a)
First Use Date: 2007-08-15
First Use in Commerce Date: 2007-08-15

International Class: 010
Class Status: Active
blood glucose monitoring devices
Basis: 1(a)
First Use Date: 2007-08-15
First Use in Commerce Date: 2007-08-15

ADDITIONAL INFORMATION

Color(s) Claimed: The color(s) dark blue, orange, light blue, and white is/are claimed as a feature of the mark.

Description of Mark: The mark consists of the wording "ONETOUCH" and "ULTRAMINI", as well as the egg shaped cutout, appear in white, the wavy band appears in orange, the background above the wavy band appears in dark blue, and the background below the wavy band appears in light blue.

Design Search Code(s):

10.07.25 - Bed pans; Blood pressure apparatus; Braces (neck, back, teeth, leg, etc.); Caps, surgical; Clamps, medical; Eye droppers; Face Masks, surgical; Gloves, surgical; Hearing aids; Heating pads; Hot water bottles; Inhalers (medical); Intravenous devices; Masks, surgical; Mirrors, dental; Pans, bed; Scrubs (surgical); Surgical caps; Surgical gowns; X-ray apparatus
10.09.01 - Capsules, medicinal/nonmedicinal; Pills; Tablets, medicines; Tablets, nonmedical products in tablet form
26.03.02 - Ovals, plain single line; Plain single line ovals
26.11.21 - Rectangles that are completely or partially shaded
26.17.02 - Bands, wavy; Bars, wavy; Lines, wavy; Wavy line(s), band(s) or bar(s)

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2008-04-01 - Registered - Principal Register

2008-02-27 - Law Office Registration Review Completed

2008-02-19 - Allowed for Registration - Principal Register (SOU accepted)

2008-01-29 - Amendment From Applicant Entered

2008-01-29 - Communication received from applicant

2008-01-16 - Assigned To LIE

2007-12-03 - PAPER RECEIVED

2007-09-19 - Non-final action mailed

2007-09-18 - SU - Non-Final Action - Written

2007-08-29 - Statement of use processing complete

2007-07-25 - Amendment to Use filed

2007-07-25 - PAPER RECEIVED

2007-03-13 - Noa Mailed - SOU Required From Applicant

2006-12-19 - Published for opposition

2006-11-29 - Notice of publication

2006-10-30 - Law Office Publication Review Completed

2006-10-20 - Assigned To LIE

2006-10-16 - Approved for Pub - Principal Register (Initial exam)

2006-10-13 - Teas/Email Correspondence Entered

2006-10-12 - Communication received from applicant

2006-10-12 - TEAS Response to Office Action Received

2006-09-26 - Priority Action Mailed

2006-09-26 - Priority Action Written

2006-09-17 - Assigned To Examiner

2006-06-20 - Application Filing Receipt Mailed

2006-06-16 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Laurence s. Rickles

Correspondent

LAURENCE S. RICKLES
JOHNSON & JOHNSON
ONE JOHNSON & JOHNSON PLAZA
NEW BRUNSWICK, NEW JERSEY 08933-7001
Phone Number: (732) 524-2281

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This page was generated by the TARR system on 2009-08-05 01:07:35 ET

Serial Number: 76661412 Assignment Information Trademark Document Retrieval

Registration Number: 3402295

Mark



(words only): ONETOUCH ULTRAMINI

Standard Character claim: No

Current Status: Registered.

Date of Status: 2008-03-25

Filing Date: 2006-06-12

Transformed into a National Application: No

Registration Date: 2008-03-25

Register: Principal

Law Office Assigned: LAW OFFICE 107

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2008-02-20

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. JOHNSON & JOHNSON

Address:

JOHNSON & JOHNSON
One Johnson & Johnson Plaza

New Brunswick, NJ 089337001
United States
Legal Entity Type: Corporation
State or Country of Incorporation: New Jersey
Phone Number: (732) 524-2281

GOODS AND/OR SERVICES

International Class: 005
Class Status: Active
Test strips for blood glucose monitoring devices
Basis: 1(a)
First Use Date: 2006-09-07
First Use in Commerce Date: 2006-09-07

International Class: 010
Class Status: Active
blood glucose monitoring devices
Basis: 1(a)
First Use Date: 2006-09-07
First Use in Commerce Date: 2006-09-07

ADDITIONAL INFORMATION

Color(s) Claimed: The color(s) dark blue, orange, light blue, and white is/are claimed as a feature of the mark.

Description of Mark: The mark consists of the wording "ONETOUCH" and "ULTRAMINI", appear in white, the wavy band appears in orange, the background above the wavy band appears in dark blue, and the background below the wavy band appears in light blue.

Design Search Code(s):
26.11.21 - Rectangles that are completely or partially shaded

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2008-03-25 - Registered - Principal Register

2008-02-20 - Law Office Registration Review Completed

2008-02-19 - Allowed for Registration - Principal Register (SOU accepted)

2008-01-16 - Amendment From Applicant Entered
2008-01-16 - Communication received from applicant
2008-01-14 - Assigned To LIE
2007-11-30 - PAPER RECEIVED
2007-09-19 - Non-final action mailed
2007-09-18 - SU - Non-Final Action - Written
2007-08-29 - Statement of use processing complete
2007-07-25 - Amendment to Use filed
2007-07-25 - PAPER RECEIVED
2007-03-13 - Noa Mailed - SOU Required From Applicant
2006-12-19 - Published for opposition
2006-11-29 - Notice of publication
2006-10-30 - Law Office Publication Review Completed
2006-10-20 - Assigned To LIE
2006-10-16 - Approved for Pub - Principal Register (Initial exam)
2006-10-13 - Teas/Email Correspondence Entered
2006-10-12 - Communication received from applicant
2006-10-12 - TEAS Response to Office Action Received
2006-09-26 - Non-final action mailed
2006-09-26 - Non-Final Action Written
2006-09-17 - Assigned To Examiner
2006-06-20 - Application Filing Receipt Mailed
2006-06-16 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Laurence S. Rickles

Correspondent

LAURENCE S. RICKLES
JOHNSON & JOHNSON
ONE JOHNSON & JOHNSON PLAZA
NEW BRUNSWICK, NEW JERSEY 08933-7001
Phone Number: (732) 524-2281

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This page was generated by the TARR system on 2009-08-05 01:29:49 ET

Serial Number: 78374570 Assignment Information Trademark Document Retrieval

Registration Number: 3357047

Mark

BIOINTRAFIX

(words only): BIO-INTRAFIX

Standard Character claim: Yes

Current Status: Registered.

Date of Status: 2007-12-18

Filing Date: 2004-02-26

Transformed into a National Application: No

Registration Date: 2007-12-18

Register: Principal

Law Office Assigned: LAW OFFICE 105

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2007-11-10

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. Johnson & Johnson

Address:

Johnson & Johnson
One Johnson & Johnson Plaza

New Brunswick, NJ 089337001
United States
Legal Entity Type: Corporation
State or Country of Incorporation: New Jersey
Phone Number: 732-524-2281
Fax Number: 732-524-6341

GOODS AND/OR SERVICES

International Class: 010
Class Status: Active
bone screws and surgical instruments used in knee implant and knee reconstruction surgery
Basis: 1(a)
First Use Date: 2006-05-03
First Use in Commerce Date: 2006-05-03

ADDITIONAL INFORMATION

(NOT AVAILABLE)

MADRID PROTOCOL INFORMATION

(NOT AVAILABLE)

PROSECUTION HISTORY

NOTE: To view any document referenced below, click on the link to "Trademark Document Retrieval" shown near the top of this page.

2007-12-18 - Registered - Principal Register
2007-11-10 - Law Office Registration Review Completed
2007-11-10 - Assigned To LIE
2007-10-10 - Allowed for Registration - Principal Register (SOU accepted)
2007-09-08 - Teas/Email Correspondence Entered
2007-08-24 - Communication received from applicant
2007-08-24 - TEAS Response to Office Action Received
2007-02-27 - Non-final action mailed
2007-02-26 - SU - Non-Final Action - Written
2007-01-26 - Statement of use processing complete

2006-11-24 - Amendment to Use filed
2006-11-24 - PAPER RECEIVED
2006-05-24 - Extension 2 granted
2006-05-24 - Extension 2 filed
2006-05-24 - TEAS Extension Received
2005-11-09 - Extension 1 granted
2005-11-09 - Extension 1 filed
2005-11-09 - TEAS Extension Received
2005-05-24 - Noa Mailed - SOU Required From Applicant
2005-03-01 - Published for opposition
2005-02-09 - Notice of publication
2004-12-28 - Law Office Publication Review Completed
2004-09-07 - Assigned To LIE
2004-08-24 - Approved for Pub - Principal Register (Initial exam)
2004-08-24 - Assigned To Examiner
2004-03-12 - New Application Entered In Tram

ATTORNEY/CORRESPONDENT INFORMATION

Attorney of Record

Laurence S. Rickles

Correspondent

Laurence S. Rickles
Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7001
Phone Number: 732-524-2281
Fax Number: 732-524-6341

Thank you for your request. Here are the latest results from the TARR web server.

This page was generated by the TARR system on 2009-08-05 01:08:06 ET

Serial Number: 78686487 Assignment Information Trademark Document Retrieval

Registration Number: 3132519

Mark

IMMUNICON

(words only): IMMUNICON

Standard Character claim: Yes

Current Status: Registered.

Date of Status: 2006-08-22

Filing Date: 2005-08-05

Filed as TEAS Plus Application: Yes

Currently TEAS Plus Application: No

Transformed into a National Application: No

Registration Date: 2006-08-22

Register: Principal

Law Office Assigned: LAW OFFICE 103

If you are the applicant or applicant's attorney and have questions about this file, please contact the Trademark Assistance Center at TrademarkAssistanceCenter@uspto.gov

Current Location: 650 -Publication And Issue Section

Date In Location: 2006-08-22

LAST APPLICANT(S)/OWNER(S) OF RECORD

1. JOHNSON & JOHNSON

Address:

JOHNSON & JOHNSON
ONE JOHNSON & JOHNSON PLAZA
NEW BRUNSWICK, NJ 089337001
United States

Legal Entity Type: Corporation**State or Country of Incorporation:** New Jersey

GOODS AND/OR SERVICES

International Class: 001**Class Status:** Active

Diagnostic preparations or reagents for scientific or research use; Diagnostic preparations for scientific use; Diagnostic preparations other than for medical or veterinary purposes; Diagnostic preparations used in science

Basis: 1(a)**First Use Date:** 1984-03-07**First Use in Commerce Date:** 1984-03-07**International Class:** 005**Class Status:** Active

Clinical medical reagents; Diagnostic preparations for clinical or medical laboratory use; Diagnostic preparations for medical and veterinary use; Diagnostic preparations for medical or veterinary purposes; Diagnostic reagents for clinical or medical laboratory use; Diagnostic reagents for in vitro use in biochemistry, clinical chemistry and microbiology; Diagnostic reagents for medicinal use; Medical diagnostic reagents; Medical diagnostic reagents and assays for testing of body fluids; Nucleic acid sequences and chemical reagents for medical and veterinary purposes; Preparations for detecting genetic predispositions for medical purposes; Reagents and media for medical and veterinary diagnostic purposes; Reagents for medical use

Basis: 1(a)**First Use Date:** 1984-03-07**First Use in Commerce Date:** 1984-03-07**International Class:** 010**Class Status:** Active

Electromagnetic medical diagnostic imaging apparatus; Magnets for medical purposes; Medical apparatus for diagnosing suspected heart attacks; Medical instrument for cardiovascular diagnostics

Basis: 1(a)**First Use Date:** 1984-03-07**First Use in Commerce Date:** 1984-03-07

ADDITIONAL INFORMATION

Prior Registration Number(s):

1352184

1352277