FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
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0.5

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					0. 000		or tire		ompany / tot	0. 20 .0						
Name and Address of Reporting Person* Modeiros David Leffrey					2. Issuer Name and Ticker or Trading Symbol OUESTCOR PHARMACEUTICALS INC							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Medeiros David Jeffrey					QCOR]						_ [X Officer below)	(give title	10% O Other (below)		
(Last) (First) (Middle) 1300 NORTH KELLOGG DRIVE SUITE D					3. Date of Earliest Transaction (Month/Day/Year) 02/16/2011							′	enior VP, Pharm. Operations			
(Street)				'	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
ANAHE	IM C	A	92807										iled by More	than One Repo		
(City)	(S	tate)	(Zip)													
		Tab	le I - Non	-Derivat	ive Se	curities	s Ac	quired, Di	isposed o	of, or Be	neficiall	ly Owned	l			
Date				2. Transact Date (Month/Day		2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr. 5)			Beneficia Owned F	es F ally (i Following (i	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code V	Amount	(A) or (D) Prio		Reported Transact (Instr. 3	tion(s)				
		-	Table II - D					uired, Dis s, options,				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Cod	nsaction le (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Cod	le V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
STOCK OPTION (Right to	\$14.24	02/16/2011		A		50,000		(2)	02/15/2021	Common Stock	50,000	\$0	50,000	D		

Explanation of Responses:

- $1.\ Non-Qualified\ Options\ were\ granted\ under\ the\ Questcor\ Pharmaceuticals,\ Inc.\ 2006\ Equity\ Incentive\ Award\ Plan.$
- 2. The options vest over 48 months beginning on the grant date, subject to a one year cliff such that no options vest until the first anniversary of grant date, at which time 25% of such options vest.

/s/ David Medeiros

02/18/2011

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.