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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average hurder

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hours per response:		0.5

1. Name and Address of Reporting Person* <u>Medeiros David Jeffrey</u> (Last) (First) (Middle) 1300 NORTH KELLOGG DRIVE SUITE D			2. Issuer Name and Ticker or Trading Symbol <u>QUESTCOR PHARMACEUTICALS INC</u> [QCOR]		ationship of Reporting Person(s) to Issuer (all applicable) Director 10% Owner Officer (give title Other (specify below) below)		
		,	3. Date of Earliest Transaction (Month/Day/Year) 03/03/2014		EVP and CTO		
(Street) ANAHEIM	СА	92807	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Filir Form filed by One Rep Form filed by More tha Person	porting Person	
(City)	(State)	(Zip)					

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Transaction Disposed Of (D) (Instr. 3, 4 and Code (Instr. 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	03/03/2014		М		834	A	\$35.78	120,873	D	
Common Stock	03/03/2014		S		834	D	\$62	120,039	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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)	4. Transa Code (8)		of Exp		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)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (right to buy) ⁽¹⁾	\$35.78	03/03/2014		М			834	(2)	02/14/2022	Common Stock	834	\$0.00	0	D	

Explanation of Responses:

1. Stock options granted under the Questcor Pharmaceuticals, Inc. 2006 Equity Incentive Award Plan.

2. The option was granted on 02/15/2012 for the right to buy 20,000 shares of common stock of the Issuer. Options vested pursuant to achievement of certain performance-based criteria.

Remarks:

The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 Trading Plan (the "Automatic Trading Plan") adopted by the reporting person in the fourth quarter of 2013 and effective 30 days postadoption. There have been no changes to the Automatic Trading Plan since its adoption, and there have been no sales by the Reporting Person outside of the Automatic Trading Plan since its adoption. The Automatic Trading Plan controls the exact dates and amounts of sales.

/s/	David J.	Medeiros	

** Signature of Reporting Person Date

03/05/2014

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.