



STATE OF MAINE
 BOARD OF NURSING
 158 STATE HOUSE STATION
 AUGUSTA, MAINE
 04333-0158

JOHN ELIAS BALDACC
 GOVERNOR

MYRA A. BROADWAY, J.D., M.S., R.N.
 EXECUTIVE DIRECTOR

IN RE: **ROSITA M. LEWIS**)
 of Solon, Maine)
 License # R017417) **CONSENT AGREEMENT FOR
 REINSTATEMENT AND
 PROBATION**

INTRODUCTION

This document is a Consent Agreement regarding Rosita M. Lewis' license to practice registered professional nursing and her approval to practice as a nurse practitioner in the State of Maine. The parties enter into this Agreement pursuant to 10 M.R.S.A. § 8003(5)(B) and 32 M.R.S.A. § 2105-A(1-A)(B). The parties to this Consent Agreement are Rosita M. Lewis ("Licensee"), Maine State Board of Nursing ("Board") and the Department of Attorney General, State of Maine. The parties reached this Agreement on the basis of information from the United States Drug Enforcement Agency (DEA), Somerset County District Attorneys Office and patient records from the licensee's advanced practice office.

FACTS

1. Rosita M. Lewis was originally licensed as a registered professional nurse in Maine in 1973.
2. Rosita M. Lewis was originally approved by the Board to practice as a nurse practitioner in Maine in 1988.
3. Rosita M. Lewis performed services as a nurse practitioner in Solon, Maine at her facility named Timberline Health Care.
4. On April 3, 2001 Ms. Lewis was served with a Drug Enforcement Administrative Inspection Warrant issued by the United States District Court for the purpose of inspecting Ms Lewis's controlled substance premises. See Exhibit A.
5. As a result of the inspection of Ms. Lewis' controlled substance premises, DEA drug diversion investigators determined that Ms. Lewis was in violation of her Controlled Substances Registration (DEA# ML0027602).
 - a. Ms. Lewis failed to conduct any controlled drug inventories. Failure to take a biennial inventory is a violation under the provisions of Title 21 U.S.C. Section 827 and 21 C.F.R. 1304.11(c).



PRINTED ON RECYCLED PAPER

OFFICES LOCATED AT: 24 STONE ST., AUGUSTA, ME.

TDD: (207) 287-1151

PHONE: (207) 287-1133

FAX: (207) 287-1149

<http://www.maine.gov/boardofnursing/>

- b. Ms. Lewis claims that controlled substances were stolen from her premises, however, she failed to file the required documentation to report the theft to the U.S. Drug Enforcement Administration, (DEA Form-106 "Report of Theft or Loss of Controlled Substances"). Ms. Lewis's failure to file the report of theft of a controlled substance is a violation under the provisions of 21 U.S.C. Section 827 and 21 C.F.R. 1301.76(b).
- c. Ms. Lewis is responsible for maintaining prescriptive and dispensing records of controlled substances in her patients' files. A review of the patients' files disclosed that it could not be determined if Ms. Lewis' controlled substance entries denoted a prescription or an actual drug dispensing. Ms. Lewis' lack of controlled substance records is a violation under the provisions of 21 U.S.C. Section 827 and 21 C.F.R. 1304.22 (c).
6. As a result of the above violations in Paragraph 5.a. - c., Ms. Lewis voluntarily surrendered her "Controlled Substances Registration," registration number ML0027602. See Exhibit C.
 7. Rosita M. Lewis admits that she knew that a patient for whom she prescribed hydrocodone was giving some of the hydrocodone to his girlfriend and failed to take any action on this matter.
 8. On two separate occasions Ms. Lewis diverted drugs to a patient knowing the patient intended to sell the drugs for a profit. The diverted drugs were darvocet.
 9. The Somerset County Sheriff's Department arrested Ms. Lewis on April 3, 2001 for trafficking in scheduled drugs. Ms. Lewis entered a plea of guilty on January 31, 2002 in the Somerset County Superior Court, Docket # CR-02-39, for two counts of Unlawful Furnishing Scheduled Drugs, Class D misdemeanors. Ms. Lewis was sentenced to 364 days on each count, both to be served concurrently, however, the sentence as it relates to confinement was suspended and Ms. Lewis was placed on one year of probation.
 10. On April 13, 2001 the Board did an emergency suspension of in accordance with 5 M.R.S.A. § 10004 (3) of her registered professional nurse license and her approval to practice as a nurse practitioner. An adjudicatory hearing was scheduled for May 11, 2001, which was subsequently cancelled at the licensee's request.
 11. On May 3, 2001 the Maine State Board of Nursing subpoenaed records and documents from Ms. Lewis' health care facility, Timberline Health Care to investigate a complaint regarding Ms. Lewis' prescriptive medication practices, her competence to practice nursing and her ability to practice as a nurse practitioner. The following was found:

- a. Ms. Lewis failed to competently assess patients for the purpose of administering medications, specifically, she failed to utilize pain modalities, collect patient histories, administer physical exams, obtain lab reports to evaluate patient response to medications and potential contraindications and develop patient plans of care.
 - b. Ms. Lewis failed to provide competent documentation for management of pain medication to her patients.
12. Rosita M. Lewis is currently in therapy to address issues that she states contributed to the above-described problems in her nursing practice.

REINSTATEMENT WITH CONDITIONS OF PROBATION

13. Rosita M. Lewis' license to practice registered professional nursing, only in the State of Maine, is reinstated on a probationary status with conditions. The period of probation will commence on Rosita M. Lewis' return to nursing practice, either through employment or pursuant to an educational program. The period of probation will be for a period of five years, to be effective only while she is employed in nursing practice or enrolled in a nursing education program. For purposes of this Consent Agreement, nursing employment is any employment during which Rosita M. Lewis performs nursing services. Rosita M. Lewis' probationary license will be subject to the following conditions:
- a. Rosita M. Lewis will continue in a treatment program to such an extent and for as long as her treatment providers recommend.
 - b. Rosita M. Lewis will arrange for and ensure the submission of quarterly reports to the Board by her treatment providers during the probationary period.
 - c. Rosita M. Lewis will enroll in an accredited educational institution and successfully complete a registered professional nursing refresher course prior to resuming volunteer work or employment as a registered professional nurse. In addition, Ms. Lewis will independently seek education in the areas of documentation, legal and ethical issues and professional boundaries and upon completion provide verification to the Board that she has completed this portion of education.
 - d. Rosita M. Lewis employment is restricted during the period of probation to structured settings with on-site supervision of another registered professional nurse, which shall not include assignments from temporary employment agencies. Rosita M. Lewis will immediately notify the Board in writing should she return to employment or an educational program in the field of nursing. Notice under this section shall include the place and position of employment or

Rosita M. Lewis
Consent Agreement for Voluntary Surrender of License
Page 4

the educational program and any subsequent change in employment or educational program.

e. Rosita M. Lewis will notify any and all of her nursing employers and notify faculty involved in any clinical studies of the terms of this Consent Agreement and shall provide them with a copy of it.

f. Rosita M. Lewis will arrange for and ensure the submission to the Board of quarterly reports from her nursing employer regarding her nursing practice.

g. Rosita M. Lewis agrees and understands that the Board and the Department of Attorney General shall have access to any and all medical records and all otherwise confidential or medically privileged information pertaining to her treatment which the Board deems necessary to evaluate Rosita M. Lewis' compliance with the Consent Agreement. Rosita M. Lewis shall provide such information, shall authorize the release of such records and information, and shall authorize any such discussions and communications with any and all persons involved in her care, counseling and employment as may be requested by the Board for the purpose of evaluating Rosita M. Lewis' compliance with the Consent Agreement.

14. Rosita M. Lewis agrees and understands that her license will remain on probationary status and subject to the terms of this Consent Agreement indefinitely beyond the five year probationary period, until and unless the Board, at Rosita M. Lewis' written request, votes to terminate Rosita M. Lewis' probation. When considering whether to terminate the probation, the Board will consider the extent to which Rosita M. Lewis has complied with the provisions of this Agreement.
15. Rosita M. Lewis understands that this document is a Consent Agreement that affects her rights to practice nursing in Maine. Rosita M. Lewis understands that she does not have to execute this Consent Agreement and that she has the right to consult with an attorney before entering into the Consent Agreement.
16. If Rosita M. Lewis fails to meet any of the obligations of this Consent Agreement, the Board may take any disciplinary action, which it deems appropriate and impose any of the sanctions, including but not limited to that found in Title 10 M.R.S.A. § 8003 and Title 32 M.R.S.A. § 2105-A.
17. Rosita M. Lewis affirms that she executes this Consent Agreement of her own free will.
18. Modification of this Consent Agreement must be in writing and signed by all the parties.

Rosita M. Lewis
Consent Agreement for Voluntary Surrender of License
Page 6

19. This Consent Agreement is not subject to review or appeal by the Licensee, but may be enforced by an action in the Superior Court.
20. This Consent Agreement becomes effective upon the date of the last necessary signature below.

I, ROSITA M. LEWIS, HAVE READ AND UNDERSTAND THE FOREGOING CONSENT AGREEMENT. I UNDERSTAND THAT BY SIGNING IT, I WAIVE CERTAIN RIGHTS. I SIGN IT VOLUNTARILY, WITHOUT ANY THREAT OR PROMISE. I UNDERSTAND THAT THIS CONSENT AGREEMENT CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND.

DATED: 7/17/03 Rosita Lewis
ROSITA M. LEWIS

DATED: 7/16/03 Michael J. Murphy
MICHAELA MURPHY ESQ.
Attorney for Rosita M. Lewis

**FOR THE MAINE STATE
BOARD OF NURSING**

DATED: July 17, 2003 Myra A. Broadway
MYRA A. BROADWAY, J.D., M.S., R.N.
Executive Director

**FOR THE OFFICE OF THE
ATTORNEY GENERAL**

DATED: July 22, 2003 John H. Richards
JOHN H. RICHARDS
Assistant Attorney General

U. S. Department of Justice - Drug Enforcement Administration

**VOLUNTARY SURRENDER OF CONTROLLED
SUBSTANCES PRIVILEGES**

DEA USE ONLY
File No. [REDACTED]

After being fully advised of my rights, and understanding that I am not required to surrender my controlled substances privileges, I freely execute this document and choose to take the actions described herein.

In view of my alleged failure to comply with the Federal requirements pertaining to controlled substances, and as an indication of my good faith in desiring to remedy any incorrect or unlawful practices on my part;

In view of my desire to terminate handling of controlled substances listed in schedule(s) _____;

I hereby voluntarily surrender my Drug Enforcement Administration Certificate of Registration, unused order forms, and all my controlled substances listed in schedule(s) III-V as evidence of my agreement to relinquish my privilege to handle controlled substances listed in schedule(s) III-V. Further, I agree and consent that this document shall be authority for the Administrator of the Drug Enforcement Administration to terminate and revoke my registration without an order to show cause, a hearing, or any other proceedings, (and if not all controlled substances privileges are surrendered, be issued a new registration certificate limited to schedule(s) N/A).

I waive refund of any payments made by me in connection with my registration.

I understand that I will not be permitted to order, manufacture, distribute, possess, dispense, administer, prescribe, or engage in any other controlled substance activities whatever, until such time as I am again properly registered.

NAME OF REGISTRANT (Print) Rosita M. Lewis, NP		ADDRESS OF REGISTRANT 2 Main Street PO Box 317 Solon, ME 04979	
DEA REGISTRATION NO. ML0027602			
SIGNATURE OF REGISTRANT OR AUTHORIZED INDIVIDUAL <i>Rosita M. Lewis</i>		DATE 4/3/01	

WITNESSES:

NAME AND DATE <i>Benedict M. Celso</i>		TITLE <i>4/3/01</i>	
NAME AND DATE <i>Jerry R</i>		TITLE <i>4/3/01</i>	

PRIVACY ACT

AUTHORITY: Section 301 of the Controlled Substances Act of 1970 (PL 91-513).
PURPOSE: Permit voluntary surrender of controlled substances.
ROUTINE USES: The Controlled Substances Act Registration Records produces special reports as required for statistical analytical purposes. Disclosures of information from this system are made to the following categories of users for the purposes stated:
A. Other Federal law enforcement and regulatory agencies for law enforcement and regulatory purposes.
B. State and local law enforcement and regulatory agencies for law enforcement and regulatory purposes.
C. Persons registered under the Controlled Substances Act (Public Law 91-513) for the purpose of verifying the registration of customers and practitioners.
EFFECT: Failure to provide the information will have no effect on the individual.

ROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON, D.C. 20537

Section 306 and 1008 of the U.S.C. 824 and 958 of the Controlled Substance Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, or dispense, import, or export a controlled substance.

DEA REGISTRATION NUMBER: 410027602

THIS REGISTRATION EXPIRES: 02-28-1998

FEE PAID: 4210.00

SCHEDULES: 2, 3, 4, 5

BUSINESS ACTIVITY: MID-LEVEL 0245 02-20-0091

ATTACHMENT# 5
CASE FILE # [REDACTED]
DATE [REDACTED]
INITIALS: [REDACTED]

LEWIS, ROSITA M MD
2935 SOUTH MAIN STREET
SOLON, ME 04979

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, BUSINESS ACTIVITY, OR VALID AFTER THE EXPIRATION DATE.

ATTACHMENT#
CASE FILE #
DATE:
INV. INITIALS

3
[REDACTED]
4-5-01
JYL

UNITED STATES DISTRICT COURT

DISTRICT OF MAINE

IN THE MATTER OF THE)
ADMINISTRATIVE INSPECTION)
IN RE: Rosita M. Lewis, NP)
2 Main Street)
P.O. Box 317)
Solon, ME 04979)

MAGISTRATE JUDGE
NO. 01-16-M

WARRANT FOR INSPECTION

TO: Jennifer Ross, Diversion Investigator and any other authorized Diversion Investigator or Special Agent of the Drug Enforcement Administration of the United States Department of Justice.

1. Any judge of the United States may, within his territorial jurisdiction, and upon proper oath or affirmation showing probable cause, issue warrants for the purpose of conducting administrative inspections. 21 U.S.C. § 880(d)(1). For the purposes of this section, the term "probable cause" means a valid public interest in the effective enforcement of this subchapter or regulations thereunder sufficient to justify administrative inspections of the area, premises, building, or conveyance, or contents thereof, in the circumstances specified in the application for the warrant. 21 U.S.C. § 880(d)(1) Administrative probable cause shall not mean criminal probable cause as defined by Federal statute or case law. 21 CFR § 1316.10

2. Application having been made and probable cause, as defined by the provisions of 21 U.S.C., Section 880(d)(1), having been shown by the affidavit of Diversion Investigator Benedict M. Celso of the Drug Enforcement Administration, it appears that inspection is appropriate pursuant to Title 21, United States Code, Section 880 of the controlled premises of

Rosita M. Lewis, NP, DEA number ML0027602, which premises is more fully described as follows:

The premises is a one story wooden green structure with white trim around the windows. There is a single door entrance in the front of the building. There is a white sign with green lettering in front of the building that reads, "Timberline Health Care", "Healthcare with a personal touch", "Appointments, and Walk-Ins", "Rosita Lewis, FNP". Two telephone numbers are listed on the sign, "207-643-2001" and "800-505-2001".

3. Therefore, pursuant to the provisions of 21 U.S.C. Section 879 and 880, you are hereby authorized to enter, in a reasonable manner and to a reasonable extent, the above-described premises during ordinary business hours for the following purposes:

- (a) To inspect and copy records, reports and other documents required to be kept under the provisions of the Comprehensive Drug Abuse Prevention and Control Act of 1970;
- (b) To inspect, within reasonable limits and in a reasonable manner, the controlled premises and all pertinent equipment, finished and unfinished drugs, and any other substance or materials, containers, and labeling found therein;
- (c) To inspect all records, files, papers, processes, controls and facilities appropriate for verification of the records, reports, and documents required to be kept under the provisions of the Act and regulations promulgated thereunder; and,
- (d) To inventory any stock of controlled substances and to obtain samples of any such substances.

4. You are hereby further authorized to seize from the above-described premises such of the following records, reports, documents, files and inventories, including, but not limited to computer or computer generated records, hard drives, disks, or other computer software, as are appropriate and necessary to the effective accomplishment of the inspection, and for the purpose

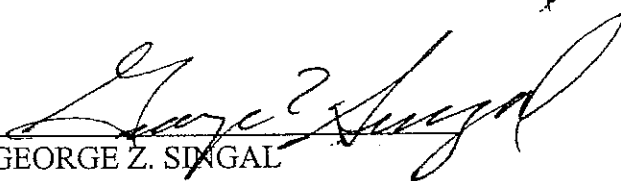
of copying them or verifying their correctness:

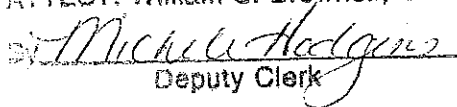
- (a) All physical inventories of controlled substances;
- (b) All executed Official Order Forms, DEA Forms-222;
- (c) All records showing the receipt of controlled substances;
- (d) All prescriptions and other records which refer to or relate to the dispensations, sale, administration, or distribution of controlled substances;
- (e) Any and all copies of DEA Forms-41, Registrant's Inventory of Drugs Surrendered and DEA Forms-106, Reports of Theft or Loss of Controlled Substances; and,
- (f) All other records, reports, and documents reflecting the dispensation, administration, sale, disposal, or distribution of controlled substances.

5. A prompt return shall be made by the inspecting officers to the undersigned

United States District Judge showing that the inspection has been completed, and accounting for all property seized pursuant to this warrant, no later than ten days from the date of issuance.

Entered this 2nd day of April, 2000.


GEORGE Z. SINGAL
United States District Judge

A TRUE COPY
ATTEST: William S. Brownell, Clerk

Deputy Clerk

UNITED STATES DISTRICT COURT

DISTRICT OF MAINE

IN THE MATTER OF THE ADMINISTRATIVE)
INSPECTION)

IN RE: Rosita M. Lewis, NP)
2 Main Street)
P.O. Box 317)
Solon, ME 04979)

MAGISTRATE JUDGE

NO. 01-16-M

**AFFIDAVIT FOR AN ADMINISTRATIVE INSPECTION WARRANT
UNDER THE AUTHORITY OF TITLE 21, UNITED STATES
CODE, SECTION 880**

I, Jennifer Ross, being duly sworn, depose and say as follows:

1. I am a duly appointed Diversion Investigator of the United States Department of Justice, Drug Enforcement Administration. I am assigned to the New England Field Division, 15 New Sudbury Street, Boston, MA 02203.

2. Pursuant to Title 21, United States Code, Sections 878(2) and 880(b)(1), (2) and (3) and Title 28, Code of Federal Regulations, Subpart R, Section 0.104 and Appendix to Subpart R, Section 3(a) and (b), I am authorized to execute administrative inspection warrants for the purpose of inspecting, copying, and verifying the correctness of records, reports, and other documents kept or made by firms registered under Title 21 United States Code, Section 827, and Title 21 C.F.R. Section 1301.01 et seq.

3. Rosita M. Lewis, NP is a duly licensed Mid-Level Practitioner with her principal place of business at Timberline Health Clinic, Route 201, Solon, ME 04979, which premises is more fully described as follows:

The premises is a one story wooden green structure with white trim around the windows. There is a single door entrance in the front of the building. There is a white sign with green lettering in front of the building that reads, "Timberline Health Care", "Healthcare with a personal touch", "Appointments, and Walk-Ins", "Rosita Lewis, FNP". Two telephone numbers are listed on the sign, "207-643-2001" and "800-505-2001". Her said place of business is a controlled premises within the meaning of Title 21, United States Code, Section 880(a) and Title 21, Code of Federal Regulations, Section 1316.02(c)(1) and (2).

4. Rosita M. Lewis, NP is registered with the Attorney General under the provisions of Title 21, United States Code, Sections 822 and 823, and has been assigned DEA Registration number ML0027602.

5. According to a DEA Automation of Reports and Consolidated Orders System (ARCOS) Report from 01/01/2000 to 12/31/2000, Rosita M. Lewis, NP was the largest Mid-Level Practitioner purchaser of the Schedule III narcotic Hydrocodone in the United States. She purchased 196.5 grams of hydrocodone.

6. I have examined the files and records of the Drug Enforcement Administration in the New England Field Division and have determined that there is no record of an inspection of the controlled premises or the controlled substances belonging to Rosita M. Lewis, NP during the past two years.

7. Rosita M. Lewis, NP is required to maintain on the premises complete and accurate records of all controlled substances received, administered, dispensed or otherwise disposed of under the provisions of 21 U.S.C. Section 827 and 21 C.F.R. Section 1301.01 et seq., on the controlled premises, which records include but are not limited to the following:

(a) All physical inventories of controlled substances.

(b) All executed Official Order Forms, DEA Forms-222.

(c) All records showing the receipt of controlled substances.

(d) All drug orders and other records reflecting the dispensing, administration or distribution of controlled substances, except for active drug orders, which shall be examined on the premises.

(e) All copies of Registrant's Inventory of Drugs Surrendered, DEA Forms-41, and Reports of Theft or Loss of Controlled Substances, DEA Forms-106.

(f) All other records, reports, and documents reflecting the dispensing, administration and distribution of controlled substances disposed of in any manner.

8. Further, I state that, in view of the foregoing circumstances, the inspection applied for is for the purpose of protecting the public health and safety. The need for the inspection, copying and verifying the records, reports and other documents required to be kept and maintained results from a valid public interest in the enforcement of the Comprehensive Drug Abuse Prevention and Control Act of 1970 and the regulations issued thereunder.


9. The inspection sought will be conducted during normal business hours and will extend only to pertinent equipment, records, files, reports, stocks of controlled substances and other documents and things necessary and appropriate to verify such records, reports, and documents which are required to be kept, and, if necessary, the inspecting officers will seize samples of finished or unfinished controlled substances from the premises. Diversion Investigators executing the warrant will present their official credentials and provide a copy of the administrative inspection warrant to the owner, operator or agent in charge of the controlled premises, as required by 21 U.S.C. Section 880(b)(2).

10. Execution of the warrant and the inspection thereunder will begin immediately upon

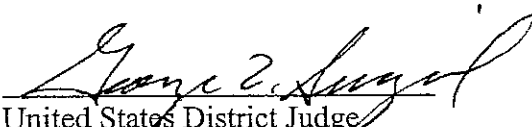
issuance, or as soon as practicable, and will be returned within ten days.

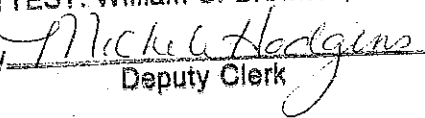
11. A return will be made to the Court upon completion of the inspection.

12. I have verified and have personal knowledge of the facts outlined herein, and they are true to the best of my knowledge, information and belief.


Jennifer Ross
Diversion Investigator
Drug Enforcement Administration

Sworn to before me, and subscribed in my presence this 2nd day of April, 2000.


United States District Judge

A TRUE COPY
ATTEST: William S. Brownell, Clerk
By 
Deputy Clerk


RETURN AND INVENTORY

I received the attached administrative inspection warrant on 4/2/01.

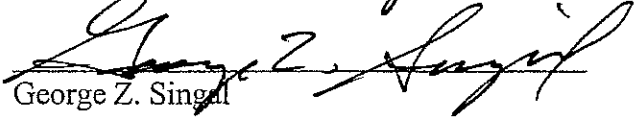
On 4/3/01, I conducted an administrative inspection on the premises described in the warrant, and I left a copy of the warrant with

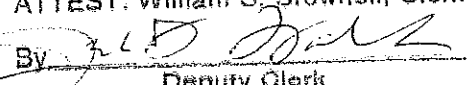
Rosita Lewis, FNP

Attached, is a DEA Form-12, Receipt for Cash or Other Items, describing the property seized pursuant to this administrative inspection warrant.


Jennifer Ross
Diversion Investigator
Drug Enforcement Administration

Sworn to before me, and subscribed in my presence, this 3rd day of April.


George Z. Singal
United States District Judge

A TRUE COPY
ATTEST: William S. Brownell, Clerk
By 
Deputy Clerk

U. S. Department of Justice - Drug Enforcement Administration

**VOLUNTARY SURRENDER OF CONTROLLED
SUBSTANCES PRIVILEGES**

DEA USE ONLY
File No. [REDACTED]

After being fully advised of my rights, and understanding that I am not required to surrender my controlled substances privileges, I freely execute this document and choose to take the actions described herein.

In view of my alleged failure to comply with the Federal requirements pertaining to controlled substances, and as an indication of my good faith in desiring to remedy any incorrect or unlawful practices on my part;

In view of my desire to terminate handling of controlled substances listed in schedule(s) _____;

I hereby voluntarily surrender my Drug Enforcement Administration Certificate of Registration, unused order forms, and all my controlled substances listed in schedule(s) III-V as evidence of my agreement to relinquish my privilege to handle controlled substances listed in schedule(s) III-V. Further, I agree and consent that this document shall be authority for the Administrator of the Drug Enforcement Administration to terminate and revoke my registration without an order to show cause, a hearing, or any other proceedings, (and if not all controlled substances privileges are surrendered, be issued a new registration certificate limited to schedule(s) N/A).

I waive refund of any payments made by me in connection with my registration.

I understand that I will not be permitted to order, manufacture, distribute, possess, dispense, administer, prescribe, or engage in any other controlled substance activities whatever, until such time as I am again properly registered.

NAME OF REGISTRANT (Print) Rosita M. Lewis, NP		ADDRESS OF REGISTRANT 2 Main Street PO Box 317 Solon, ME 04979	
DEA REGISTRATION NO. ML0027602			
SIGNATURE OF REGISTRANT OR AUTHORIZED INDIVIDUAL <i>Rosita M. Lewis</i>		DATE 4/3/01	

WITNESSES:

NAME AND DATE <i>Benedict M. Celis</i>		TITLE 4/3/01	
NAME AND DATE <i>Jerry R</i>		TITLE 4/3/01	

PRIVACY ACT

AUTHORITY: Section 301 of the Controlled Substances Act of 1970 (PL 91-513).
PURPOSE: Permit voluntary surrender of controlled substances.
ROUTINE USES: The Controlled Substances Act Registration Records produces special reports as required for statistical analytical purposes. Disclosures of information from this system are made to the following categories of users for the purposes stated:
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B. State and local law enforcement and regulatory agencies for law enforcement and regulatory purposes.
C. Persons registered under the Controlled Substances Act (Public Law 91-513) for the purpose of verifying the registration of customers and practitioners.
EFFECT: Failure to provide the information will have no effect on the individual.

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON, D.C. 20537

Sections 304 and 308 (21 U.S.C. 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

DEA REGISTRATION NUMBER

410027602

THIS REGISTRATION EXPIRES

02-28-1998

FEE PAID

2013.00

SCHEDULE

2, 3, 4, 5

BUSINESS ACTIVITY

WHOLESALE DEALER

DATE ISSUED

02-28-1991

ATTACHMENT #

CASE FILE #

DATE

INV. INITIALS

5
[REDACTED]
4-5-91
[REDACTED]

LEWIS, ROSITA R MD
2935 SOUTH MAIN STREET
SOLON, NC 28978

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, BUSINESS ACTIVITY, OR VALID AFTER THE EXPIRATION DATE.