

# ARIZONA MEDICAL BOARD

9545 E. Doubletree Ranch Road . Scottsdale, Arizona 85258 Telephone: (480) 551-2761 . Fax (480) 551-2704  
Home Page: http://www.azmd.gov

**RECEIVED BY:**

JUN 22 2006

## DISPENSING PHYSICIAN INITIAL REGISTRATION AND ANNUAL RENEWAL FORM

\*\* Please Type or Print \*\*

PHYSICIAN NAME: David H. Orenstein, MD

LICENSE #: 15128

SPECIALTY: OB/GYN ARIZONA MEDICAL BOARD BUSINESS OPERATIONS

CHECK ONE:  Initial Registration (\$200)

Renewal Registration (\$150)

- Please list below ALL locations where you will be dispensing prescription drugs, devices and controlled substances.
- For each location, place a check mark next to the descriptions of the prescription items which will be dispensed from that location.
- Include a copy of your DEA license if you are requesting dispensing of controlled substances at any location.

### PLEASE NOTE

A separate DEA license must be submitted for EACH location where controlled substances will be dispensed and must be kept current during the registration period

#### PRIMARY PRACTICE LOCATION:

DEA # FOR THIS LOCATION: [REDACTED]

Street Address		City/State/Zip Code	
7031 E. Doubletree Ranch		PARADISE VALLEY, AZ 85253	
Phone Number		E Mail	
480-483-0127		[REDACTED]	
<input checked="" type="checkbox"/> Schedule II Drugs	<input checked="" type="checkbox"/> Schedule III Drugs	<input checked="" type="checkbox"/> Prescription-Only Drugs	<input checked="" type="checkbox"/> Nubain
<input checked="" type="checkbox"/> Schedule IV Drugs	<input checked="" type="checkbox"/> Schedule V Drugs	<input checked="" type="checkbox"/> Prescription Devices	<input checked="" type="checkbox"/> [REDACTED]

#### ADDITIONAL PRACTICE LOCATION:

DEA # FOR THIS LOCATION: [REDACTED]

Street Address		City/State/Zip Code	
5651 N. 7th Street		Phoenix AZ 85014	
Phone Number		E Mail	
602-263-2235		[REDACTED]	
<input checked="" type="checkbox"/> Schedule II Drugs	<input checked="" type="checkbox"/> Schedule III Drugs	<input checked="" type="checkbox"/> Prescription-Only Drugs	<input checked="" type="checkbox"/> Nubain
<input checked="" type="checkbox"/> Schedule IV Drugs	<input checked="" type="checkbox"/> Schedule V Drugs	<input checked="" type="checkbox"/> Prescription Devices	<input checked="" type="checkbox"/> [REDACTED]

List any additional locations on the reverse side of this form and place a check mark here:

Physician's Signature: David Orenstein, MD Date: 6-14-06

Initial registration fee: \$200.00 per physician

Renewal registration fee: \$150.00 per physician

Make checks or money orders payable to ARIZONA MEDICAL BOARD

For your convenience, we accept payments by Visa or MasterCard

If you wish to pay by payment card, please complete the attached  
PAYMENT CARD AUTHORIZATION FORM

 ENTERED

T-110 P003/009 F-234

6026040159

06-21-'06 16:39 FROM-PLANNED PARENTHOOD

Schedule II Drugs	<input checked="" type="checkbox"/>	Schedule III Drugs	<input checked="" type="checkbox"/>	Prescription-Only Drugs	<input checked="" type="checkbox"/>	Nubain	<input checked="" type="checkbox"/>
Schedule IV Drugs	<input checked="" type="checkbox"/>	Schedule V Drugs	<input checked="" type="checkbox"/>	Prescription Devices	<input checked="" type="checkbox"/>		

ADDITIONAL PRACTICE LOCATION:

DEA # FOR THIS LOCATION:

Street Address			City/State/Zip Code				
1250 E. APACHE #108			Tempe AZ 85281				
Phone Number			Fax Number				
602-277-7526			480-921-8172				
E Mail							
Schedule II Drugs	<input checked="" type="checkbox"/>	Schedule III Drugs	<input checked="" type="checkbox"/>	Prescription-Only Drugs	<input checked="" type="checkbox"/>	Nubain	<input checked="" type="checkbox"/>
Schedule IV Drugs	<input checked="" type="checkbox"/>	Schedule V Drugs	<input checked="" type="checkbox"/>	Prescription Devices	<input checked="" type="checkbox"/>		

ADDITIONAL PRACTICE LOCATION:

DEA # FOR THIS LOCATION:

Street Address			City/State/Zip Code				
4417 W. 7th Ave			Phoenix AZ 85012				
Phone Number			Fax Number				
602-277-7536			602-889-6571				
E Mail							
Schedule II Drugs	<input checked="" type="checkbox"/>	Schedule III Drugs	<input checked="" type="checkbox"/>	Prescription-Only Drugs	<input checked="" type="checkbox"/>	Nubain	<input checked="" type="checkbox"/>
Schedule IV Drugs	<input checked="" type="checkbox"/>	Schedule V Drugs	<input checked="" type="checkbox"/>	Prescription Devices	<input checked="" type="checkbox"/>		

ADDITIONAL PRACTICE LOCATION:

DEA # FOR THIS LOCATION:

12/31/06

Street Address			City/State/Zip Code				
8822 N. 43rd Ave			Glendale, AZ 85302				
Phone Number			Fax Number				
E Mail							
Schedule II Drugs	<input checked="" type="checkbox"/>	Schedule III Drugs	<input checked="" type="checkbox"/>	Prescription-Only Drugs	<input checked="" type="checkbox"/>	Nubain	<input checked="" type="checkbox"/>
Schedule IV Drugs	<input checked="" type="checkbox"/>	Schedule V Drugs	<input checked="" type="checkbox"/>	Prescription Devices	<input checked="" type="checkbox"/>		

ADDITIONAL PRACTICE LOCATION:

DEA # FOR THIS LOCATION:

Street Address			City/State/Zip Code				
Phone Number			Fax Number				
E Mail							
Schedule II Drugs		Schedule III Drugs		Prescription-Only Drugs		Nubain	
Schedule IV Drugs		Schedule V Drugs		Prescription Devices			

ADDITIONAL PRACTICE LOCATION:

DEA # FOR THIS LOCATION:

Street Address			City/State/Zip Code		
Phone Number			Fax Number		
E Mail					

Orenstein  
15128

ARIZONA MEDICAL BOARD  
 9545 E. Doubletree Ranch Road, Scottsdale, Arizona 85258 Telephone: (480) 551-2761 Fax (480) 551-2704  
 Home Page: <http://www.azmboard.org>

**DISPENSING PHYSICIAN INITIAL REGISTRATION AND ANNUAL RENEWAL FORM**

**\*\* Please Type or Print \*\***

PHYSICIAN NAME: DAVID H. Orenstein

LICENSE #: 15128 SPECIALTY: OB/GYN

CHECK ONE:  Additional location  Initial Registration (\$200)  Renewal Registration (\$100)

- Please list below ALL locations where you will be dispensing prescription drugs, devices and controlled substances.
- For each location, place a check mark next to the descriptions of the prescription items which will be dispensed from that location.
- Include a copy of your DEA license if you are requesting dispensing of controlled substances at any location.

**PLEASE NOTE**  
 A separate DEA license must be submitted for EACH location where controlled substances will be dispensed and must be renewed annually. Reapplicants during the registration period.

<b>PRIMARY PRACTICE LOCATION:</b>		<b>DEA # FOR THIS LOCATION:</b>	
7031 E. Doubletree Ranch		Paradise Valley AZ 85253	
Street Address		City/State/Zip Code	
Phone Number		Fax Number	
E Mail			
Schedule II Drugs	Schedule III Drugs	Prescription-Only Drugs	Nubain
Schedule IV Drugs	Schedule V Drugs	Prescription Devices	

<b>ADDITIONAL PRACTICE LOCATION:</b>		<b>DEA # FOR THIS LOCATION:</b>	
PPENA 140 N. Litchfield Rd #100		Goodyear AZ 85338	
Street Address		City/State/Zip Code	
Phone Number		Fax Number	
E Mail			
Schedule II Drugs	Schedule III Drugs	Prescription-Only Drugs	Nubain
Schedule IV Drugs	Schedule V Drugs	Prescription Devices	

List any additional locations on the reverse side of this form and place check marks here.

Physician's Signature: David H Orenstein MD Date: 1-25-07

Initial registration fee: \$200.00 per physician. Renewal registration fee: \$100.00 per physician.

Make checks or money order payable to ARIZONA MEDICAL BOARD  
 For your convenience, we accept payments by Visa or MasterCard  
 If you wish to pay by payment card, please complete the attached  
 PAYMENT CARD AUTHORIZATION FORM

**DISPENSING PHYSICIAN ANNUAL RENEWAL FORM**

\*\* Please Type or Print \*\*

PHYSICIAN NAME: DAVID HARRIS ORENSTEIN MD

LICENSE #: 15128

*Handwritten signature/initials*

JUN 19 2008

Renewal Registration FEE (\$150) If received by June 30, 2008

**PLEASE NOTE**  
 A separate DEA license must be submitted for **EACH** location where controlled substances will be dispensed and must be kept current during the registration period

Place a check mark next to description below of all items which will be dispensed from all locations. (Certificate will be issued only for items that are checked)

Schedule II Drugs	✓	Schedule III Drugs	✓	Prescription-Only Drugs	✓	Nubain	✓
Schedule IV Drugs	✓	Schedule V Drugs	✓	Prescription Devices	✓		

Your certificate will be issued for Prescription-Only Drugs and Devices if a DEA registration is not submitted for each location.

**PRIMARY PRACTICE LOCATION:**

5651 N. 7<sup>TH</sup> ST. PHOENIX AZ 85014 602-263-2223  
 Street Address City, State, Zip Code Phone #  
 [Redacted] 11-30-2006 12-31-2009 ✓  
 DEA # for this location (Attach Copy of DEA) Issued Date Expiration Date

**ADDITIONAL PRACTICE LOCATION:**

4417 N. 7<sup>TH</sup> AVE. PHOENIX AZ 85012 602-889-6575  
 Street Address City, State, Zip Code Phone #  
 [Redacted] 11-30-2006 12-31-2009 ✓  
 DEA # for this location (Attach Copy of DEA) Issued Date Expiration Date

Physician's Signature: David H. Orenstein MD Date: 5/20/08

**Renewal registration fee: \$150.00 per physician**

**Make checks or money orders payable to ARIZONA MEDICAL BOARD**  
**For your convenience, we accept payments by Visa or MasterCard**  
 If you wish to pay by payment card, please complete the attached  
**PAYMENT CARD AUTHORIZATION FORM**

*Handwritten signature: G. Seef*  
 JUN 18 2008  
**RECEIVED**  
**RECEIVED**

Physician Name DAVID HARRIS ORENSTEIN MD

License # 15128

**ADDITIONAL PRACTICE LOCATION:**

1250 E. APACHE SUITE 108 TEMPE AZ 85281 480-967-9414  
Street Address City, State, Zip Code Phone #

[REDACTED]  
DEA # for this location (Attach Copy of DEA) 11-30-2006 Issued Date 12-31-2009 ✓ Expiration Date

**ADDITIONAL PRACTICE LOCATION:**

7031 E. DOUBLETREE RANCH RD. PARADISE VALLEY AZ 85253 480-600-9050  
Street Address City, State, Zip Code Phone #

[REDACTED]  
DEA # for this location (Attach Copy of DEA) 11-14-2005 Issued Date 12-31-2008 ✓ Expiration Date

**ADDITIONAL PRACTICE LOCATION:**

8822 N. 43<sup>RD</sup> Avenue Glendale, AZ 85302 623-934-3244  
Street Address City, State, Zip Code Phone #

[REDACTED]  
DEA # for this location (Attach Copy of DEA) 11-30-2006 Issued Date 12-31-2009 ✓ Expiration Date

**ADDITIONAL PRACTICE LOCATION:**

140 N. Litchfield Rd #100 Goodwin, AZ 85338 623-932-5111  
Street Address City, State, Zip Code Phone #

[REDACTED]  
DEA # for this location (Attach Copy of DEA) 1-4-2007 Issued Date 12-31-2009 ✓ Expiration Date

**ADDITIONAL PRACTICE LOCATION:**

Street Address City, State, Zip Code Phone #

DEA # for this location (Attach Copy of DEA) Issued Date Expiration Date

# ARIZONA MEDICAL BOARD

8846 E. Doubletree Ranch Road . Scottsdale, Arizona 85258 Telephone: (480) 851-2761 . Fax (480) 851-2704  
Home Page: <http://www.azmb.gov>

## DISPENSING PHYSICIAN ANNUAL RENEWAL FORM

\*\* Please Type or Print \*\*

RECEIVED

JUN 09 2009

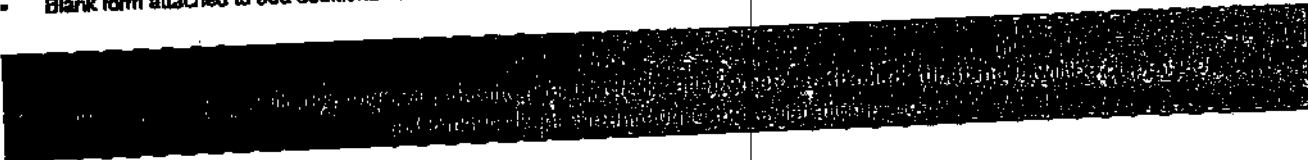
PHYSICIAN NAME: David Harris Orenstein, MD

MD LICENSE #: 15128

SPECIALTY: OB/GYN <sup>AZ</sup> MEDICAL BOARD

Renewal Registration (\$150) (Renewal & fee must come together postmarked or faxed by 6/30)

- Confirm ALL locations below where you will be dispensing prescription drugs, devices and controlled substances. (For each location, place a check mark to verify address and schedule of drugs dispensed from each location are correct)
- Include a copy of your DEA license if you are requesting dispensing of controlled substances at any location.
- Blank form attached to add additional locations



140 N LITCHFIELD RD STE 100  
GOODYEAR, AZ 85338

- Schedule II Drugs
- Schedule III Drugs
- Schedule IV Drugs
- Schedule V Drugs
- Nubain
- Prescription Only Drugs
- Prescription Devices

Dispensing location information correct  Copy of DEA attached  Remove this location

4417 N 7TH AVE  
PHOENIX, AZ 85012

- Schedule II Drugs
- Schedule III Drugs
- Schedule IV Drugs
- Schedule V Drugs
- Nubain
- Prescription Only Drugs
- Prescription Devices

Dispensing location information correct  Copy of DEA attached  Remove this location

1250 E APACHE #108  
TEMPE, AZ 85281

- Schedule II Drugs
- Schedule III Drugs
- Schedule IV Drugs
- Schedule V Drugs
- Nubain
- Prescription Only Drugs
- Prescription Devices

Dispensing location information correct     Copy of DEA attached     Remove this location

8822 N 43RD AVE  
GLENDALE, AZ 85302

- Schedule II Drugs
- Schedule III Drugs
- Schedule IV Drugs
- Schedule V Drugs
- Nubain
- Prescription Only Drugs
- Prescription Devices

Dispensing location information correct     Copy of DEA attached     Remove this location

7031 E DOUBLETREE RANCH RD  
PARADISE VALLEY, AZ 85253

- Schedule II Drugs
- Schedule III Drugs
- Schedule IV Drugs
- Schedule V Drugs
- Nubain
- Prescription Only Drugs
- Prescription Devices

Dispensing location information correct     Copy of DEA attached     Remove this location

5651 N 7TH ST  
PHOENIX, AZ 85014

- Schedule II Drugs
- Schedule III Drugs
- Schedule IV Drugs
- Schedule V Drugs
- Nubain
- Prescription Only Drugs
- Prescription Devices

Dispensing location information correct     Copy of DEA attached     Remove this location

Physician's Signature:

David Harris Umsh'nd

Date: 5/26/09



3

# ARIZONA MEDICAL BOARD

9545 E. Doubletree Ranch Road . Scottsdale, Arizona 85258 Telephone: (480) 551-2761 . Fax (480) 551-2704  
Home Page: <http://www.azmd.gov>

## DISPENSING PHYSICIAN ANNUAL RENEWAL FORM

**\*\* Please Type or Print \*\***

PHYSICIAN NAME: David Harris Orenstein, MD

MD LICENSE #: 15128

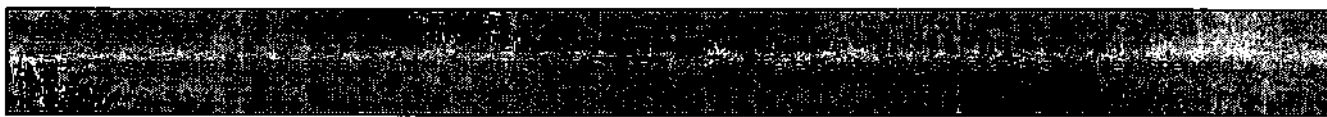
SPECIALTY: OB/GYN

RECEIVED

MAY 29 2010

**Renewal Registration (\$150) (Renewal & fee must come together postmarked or faxed by 6/30)** AZ MEDICAL BOARD

- Confirm ALL locations below where you will be dispensing prescription drugs, devices and controlled substances. (For each location, place a check mark to verify address and schedule of drugs dispensed from each location are correct)
- Include a copy of your DEA license if you are requesting dispensing of controlled substances at any location.
- Blank form attached to add additional locations



140 N LITCHFIELD RD STE 100  
GOODYEAR, AZ 85338

- Schedule II Drugs
- Schedule III Drugs
- Schedule IV Drugs
- Schedule V Drugs
- Nubain
- Prescription Only Drugs
- Prescription Devices

*and additional  
DEA*

Dispensing location information correct     Copy of DEA attached     Remove this location

✓ 4417 N 7TH AVE  
PHOENIX, AZ 85012

- Schedule II Drugs
- Schedule III Drugs
- Schedule IV Drugs
- Schedule V Drugs
- Nubain
- Prescription Only Drugs
- Prescription Devices

Dispensing location information correct     Copy of DEA attached     Remove this location

*LM 6/16  
602-263-2223*

1250 E APACHE #108  
TEMPE, AZ 85281

?  
Schedule II Drugs  
Schedule III Drugs  
Schedule IV Drugs  
Schedule V Drugs  
Nubain  
Prescription Only Drugs  
Prescription Devices

Dispensing location information correct     Copy of DEA attached     Remove this location

8822 N 43RD AVE  
GLENDALE, AZ 85302

?  
Schedule II Drugs  
Schedule III Drugs  
Schedule IV Drugs  
Schedule V Drugs  
Nubain  
Prescription Only Drugs  
Prescription Devices

Dispensing location information correct     Copy of DEA attached     Remove this location

✓  
7031 E DOUBLETREE RANCH RD  
PARADISE VALLEY, AZ 85253

Schedule II Drugs  
Schedule III Drugs  
Schedule IV Drugs  
Schedule V Drugs  
Nubain  
Prescription Only Drugs  
Prescription Devices

✓  
 Dispensing location information correct     Copy of DEA attached     Remove this location

5651 N 7TH ST  
PHOENIX, AZ 85014

?  
Schedule II Drugs  
Schedule III Drugs  
Schedule IV Drugs  
Schedule V Drugs  
Nubain  
Prescription Only Drugs  
Prescription Devices

Dispensing location information correct     Copy of DEA attached     Remove this location

Physician's Signature:

David H. Ameli MD

Date:

5/11/10

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
[REDACTED]	12-31-2012	FEE PAID
SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
2,2N, 3,3N,4,5	PRACTITIONER	12-23-2009
<b>ORENSTEIN, DAVID H</b> <b>PPCNA</b> <b>4417 N. 7TH AVE.</b> <b>PHOENIX, AZ 85013-2969</b>		

**CONTROLLED SUBSTANCE/REGULATED CHEMICAL  
REGISTRATION CERTIFICATE**  
 UNITED STATES DEPARTMENT OF JUSTICE  
 DRUG ENFORCEMENT ADMINISTRATION  
 WASHINGTON D.C. 20537

Sections 304 and 1008 (21 USC 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.

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

**REPORT  
CHANGES  
PROMPTLY**

Form DEA-223/511 (4/07)

**REQUESTING MODIFICATIONS TO YOUR  
REGISTRATION CERTIFICATE**

To request a change to your registered name, address, the drug schedule or the drug codes you handle, please

1. visit our web site at [deaddiversion.usdoj.gov](http://deaddiversion.usdoj.gov) - or
2. call our customer Service Center at 1-(800) 882-9539 - or
3. submit your change(s) in writing to:  
**Drug Enforcement Administration**  
**P.O. Box 28083**  
**Washington, DC 20083**

See Title 21 Code of Federal Regulations, Section 1301.51 for complete instructions.

**You have been registered to handle the following chemical/drug codes:**

---

<b>CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE</b>		
UNITED STATES DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION WASHINGTON, D.C. 20537		
DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
[REDACTED]	12-31-2011	Paid
SCHEDULES	BUSINESS ACTIVITY	DATE ISSUED
2,2N,3 3N,4,5	PRACTITIONER	11-03-2008
<b>ORENSTEIN, DAVID HARRIS MD</b> <b>7031 E. DOUBLETREE RANCH RD.</b> <b>PARADISE VALLEY, AZ 85253 1925</b>		
<p>Sections 304 and 1008 (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 manufacturer, distribute, dispense, import or export a controlled substance.</p> <p><b>THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IS NOT VALID AFTER THE EXPIRATION DATE.</b></p>		

<b>CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE</b>		
UNITED STATES DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION WASHINGTON, D.C. 20537		
DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
[REDACTED]	12-31-2011	Paid
SCHEDULES	BUSINESS ACTIVITY	DATE ISSUED
2,2N,3 3N,4,5	PRACTITIONER	11-03-2008
<b>ORENSTEIN, DAVID HARRIS MD</b> <b>7031 E. DOUBLETREE RANCH RD.</b> <b>PARADISE VALLEY, AZ 85253 1925</b>		
<p>Sections 304 and 1008 (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.</p> <p><b>THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, BUSINESS ACTIVITY, OR VALID AFTER THE EXPIRATION DATE.</b></p>		

Form DEA-223 (05/04)

cc #158

### ARIZONA MEDICAL BOARD

9645 E. Doubletree Ranch Road . Scottsdale, Arizona 85258 Telephone: (480) 551-2700 . Fax (480) 561-2704  
Website: www.azmd.gov

RECEIVED

JUN 21 2011

AZ MEDICAL BOARD

### DISPENSING PHYSICIAN ANNUAL RENEWAL FORM

\*\* Please Type or Print \*\*

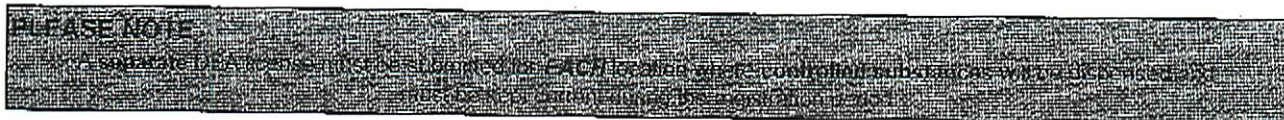
PHYSICIAN NAME: David Harris Orenstein, MD

MD LICENSE #: 15128

SPECIALTY: OB/GYN

**Renewal Registration (\$150) (Renewal & fee must come together postmarked or faxed by 6/30)**

- Confirm ALL locations below where you will be dispensing prescription drugs, devices and controlled substances. (For each location, place a check mark to verify address and schedule of drugs dispensed from each location are correct)
- Include a copy of your DEA license if you are requesting dispensing of controlled substances at any location.
- Blank form attached to add additional locations



140 N LITCHFIELD RD STE 100  
GOODYEAR, AZ 85338

Prescription Only Drugs  
Prescription Devices

Dispensing location information correct     Copy of DEA attached     Remove this location

4417 N 7TH AVE  
PHOENIX, AZ 85012

Schedule II Drugs  
Schedule III Drugs  
Schedule IV Drugs  
Schedule V Drugs  
Nubain  
Prescription Only Drugs  
Prescription Devices

Dispensing location information correct     Copy of DEA attached     Remove this location

1250 E APACHE #108  
TEMPE, AZ 85281

Prescription Only Drugs  
Prescription Devices

Dispensing location information correct     Copy of DEA attached     Remove this location

ENTERED

8822 N 43RD AVE  
GLENDALE, AZ 85302

Prescription Only Drugs  
Prescription Devices

Dispensing location information correct  Copy of DEA attached  Remove this location

7031 E DOUBLETREE RANCH RD  
PARADISE VALLEY, AZ 85253

Schedule II Drugs  
Schedule III Drugs  
Schedule IV Drugs  
Schedule V Drugs  
Nubain  
Prescription Only Drugs  
Prescription Devices

Dispensing location information correct  Copy of DEA attached  Remove this location

5651 N 7TH ST  
PHOENIX, AZ 85014

Prescription Only Drugs  
Prescription Devices

Dispensing location information correct  Copy of DEA attached  Remove this location

Physician's Signature: \_\_\_\_\_

*David H. Orenstein MD*

Date: \_\_\_\_\_

*6/21/2011*

DEA Certificate

<b>CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE</b> UNITED STATES DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION WASHINGTON, D.C. 20537		
DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
[REDACTED]	12-31-2011	Paid
SCHEDULES	BUSINESS ACTIVITY	DATE ISSUED
2,2N,3 3N,4,5	PRACTITIONER	11-03-2008
<b>ORENSTEIN, DAVID HARRIS MD</b> <b>7031 E. DOUBLETREE RANCH RD.</b> <b>PARADISE VALLEY, AZ 85263 1926</b>		
<p>Sections 304 and 1008 (21 U.S.C. 824 and 858) 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.</p> <p><b>THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IS NOT VALID AFTER THE EXPIRATION DATE.</b></p>		

<b>CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE</b> UNITED STATES DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION WASHINGTON, D.C. 20537		
DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
[REDACTED]	12-31-2011	Paid
SCHEDULES	BUSINESS ACTIVITY	DATE ISSUED
2,2N,3 3N,4,5	PRACTITIONER	11-03-2008
<b>ORENSTEIN, DAVID HARRIS MD</b> <b>7031 E. DOUBLETREE RANCH RD.</b> <b>PARADISE VALLEY, AZ 85263 1926</b>		
<p>Sections 304 and 1008 (21 U.S.C. 824 and 858) 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.</p> <p><b>THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, BUSINESS ACTIVITY, OR VALID AFTER THE EXPIRATION DATE.</b></p>		

Form DEA-223 (05/04)



ARIZONA MEDICAL BOARD

9545 E. Doubletree Ranch Road . Scottsdale, Arizona 85258 Telephone: (480) 551-2700 . Fax (480) 551-2704  
Website: www.azmd.gov

ORDER 6500  
RECEIVED  
JUN 08 2012  
AZ MEDICAL BOARD

DISPENSING PHYSICIAN ANNUAL RENEWAL FORM

\*\* Please Type or Print \*\*

PHYSICIAN NAME: David Harris Orenstein, MD

MD LICENSE #: 15128

SPECIALTY: OB/GYN

Renewal Registration (\$150) (Renewal & fee must come together postmarked or faxed by 6/30)

- Confirm ALL locations below where you will be dispensing prescription drugs, devices and controlled substances. (For each location, place a check mark to verify address and schedule of drugs dispensed from each location are correct)
- Include a copy of your DEA license if you are requesting dispensing of controlled substances at any location.
- Blank form attached to add additional locations

PLEASE NOTE

A separate DEA license must be submitted for EACH location where controlled substances will be dispensed and must be kept current during the registration period

7031 E DOUBLETREE RANCH RD  
PARADISE VALLEY, AZ 85253

- Schedule II Drugs
- Schedule III Drugs
- Schedule IV Drugs
- Schedule V Drugs
- Nubain
- Prescription Only Drugs
- Prescription Devices

Dispensing location information correct  Copy of DEA attached  Remove this location

Physician's Signature: David H. Orenstein MD Date: 5/21/2012

 ENTERED

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
[REDACTED]	12-31-2014	\$551
SCHEDULES	BUSINESS ACTIVITY	DATE ISSUED
2,2N,3 3N,4,5	PRACTITIONER	11-01-2011
<b>ORENSTEIN, DAVID HARRIS MD</b> David H. Orenstein MD PC 7031 E. DOUBLETREE RANCH RD. PARADISE VALLEY, AZ 85253 1925		

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

Sections 304 and 1008 (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.

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

<b>CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE</b> UNITED STATES DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION WASHINGTON, D.C. 20537		
DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
[REDACTED]	12-31-2014	\$551
SCHEDULES	BUSINESS ACTIVITY	DATE ISSUED
2,2N,3 3N,4,5	PRACTITIONER	11-01-2011
<b>ORENSTEIN, DAVID HARRIS MD</b> David H. Orenstein MD PC 7031 E. DOUBLETREE RANCH RD. PARADISE VALLEY, AZ 85253 1925		
<b>THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, BUSINESS ACTIVITY, OR VALID AFTER THE EXPIRATION DATE.</b>		

Sections 304 and 1008 (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.

Form DEA-223 (05/04)

# ARIZONA MEDICAL BOARD

9545 E. Doubletree Ranch Road . Scottsdale, Arizona 85258 Telephone: (480) 551-2700 . Fax (480) 551-2707  
Home Page: <http://www.azmd.gov>

CK 1167685  
\$200.00

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ARIZONA  
MEDICAL BOARD

## DISPENSING PHYSICIAN INITIAL REGISTRATION AND ANNUAL RENEWAL FORM

\*\* Please Type or Print \*\*

PHYSICIAN NAME: Dr. David Orenstein

LICENSE #: 15128

SPECIALTY: Obstetrics & Gynecology

CHECK ONE:  Initial Registration (\$200)

Renewal Registration (\$150)

- f Please list below ALL locations where you will be dispensing prescription drugs, devices and controlled substances.
- f For each location, place a check mark next to the descriptions of the prescription items which will be dispensed from that location.
- f Include a copy of your DEA license if you are requesting dispensing of controlled substances at any location.

### PLEASE NOTE

A *separate* DEA license must be submitted for *EACH* location where controlled substances will be dispensed and must be kept current during the registration period

#### PRIMARY PRACTICE LOCATION:

#### DEA # FOR THIS LOCATION:

[REDACTED]

5771 W. Eugie				Glendale, AZ 85304			
623-934-7006				623-937-3014		[REDACTED]	
Schedule II Drugs	<input checked="" type="checkbox"/>	Schedule III Drugs	<input checked="" type="checkbox"/>	Prescription-Only Drugs		Nubain	
Schedule IV Drugs	<input checked="" type="checkbox"/>	Schedule V Drugs	<input checked="" type="checkbox"/>	Prescription Devices			

#### ADDITIONAL PRACTICE LOCATION:

#### DEA # FOR THIS LOCATION:

[REDACTED]

2255 N. Wyatt Dr.				Tucson, AZ 85712			
520-624-1766				520-628-3069		[REDACTED]	
Schedule II Drugs	<input checked="" type="checkbox"/>	Schedule III Drugs	<input checked="" type="checkbox"/>	Prescription-Only Drugs		Nubain	
Schedule IV Drugs	<input checked="" type="checkbox"/>	Schedule V Drugs	<input checked="" type="checkbox"/>	Prescription Devices			

\*\*\*\* List any additional locations on the 2<sup>nd</sup> page of this form and place a check mark here:

Physician's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

5/17/15

Initial registration fee: \$200.00 per physician

Renewal registration fee: \$150.00 per physician

Make checks or money orders payable to ARIZONA MEDICAL BOARD

For your convenience, we accept payments by Visa, MasterCard or American Express

If you wish to pay by payment card, please complete the attached  
PAYMENT CARD AUTHORIZATION FORM

ENTERED

<b>ADDITIONAL PRACTICE LOCATION:</b>				<b>DEA # FOR THIS LOCATION:</b>			
Street Address				City/State/Zip Code			
1250 E. Apache #108				Tempe, AZ 85281			
Phone Number				Fax Number		E Mail	
480-966-4728				480-921-8712		[REDACTED]	
Schedule II Drugs	X	Schedule III Drugs	X	Prescription-Only Drugs		Nubain	
Schedule IV Drugs	X	Schedule V Drugs	X	Prescription Devices			

<b>ADDITIONAL PRACTICE LOCATION:</b>				<b>DEA # FOR THIS LOCATION:</b>			
Street Address				City/State/Zip Code			
Phone Number				Fax Number		E Mail	
Schedule II Drugs		Schedule III Drugs		Prescription-Only Drugs		Nubain	
Schedule IV Drugs		Schedule V Drugs		Prescription Devices			

<b>ADDITIONAL PRACTICE LOCATION:</b>				<b>DEA # FOR THIS LOCATION:</b>			
Street Address				City/State/Zip Code			
Phone Number				Fax Number		E Mail	
Schedule II Drugs		Schedule III Drugs		Prescription-Only Drugs		Nubain	
Schedule IV Drugs		Schedule V Drugs		Prescription Devices			

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Phone Number				Fax Number		E Mail	
Schedule II Drugs		Schedule III Drugs		Prescription-Only Drugs		Nubain	
Schedule IV Drugs		Schedule V Drugs		Prescription Devices			

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Street Address				City/State/Zip Code			
Phone Number				Fax Number		E Mail	
Schedule II Drugs		Schedule III Drugs		Prescription-Only Drugs		Nubain	
Schedule IV Drugs		Schedule V Drugs		Prescription Devices			

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Phone Number				Fax Number		E Mail	
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Schedule IV Drugs		Schedule V Drugs		Prescription Devices			



### ARIZONA MEDICAL BOARD

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## DISPENSING PHYSICIAN INITIAL REGISTRATION AND ANNUAL RENEWAL FORM

\*\* Please Type or Print \*\*

PHYSICIAN NAME: Dr. David Orenstein

LICENSE #: 15128

SPECIALTY: Obstetrics & Gynecology

CHECK ONE:  Initial Registration (\$200)  Renewal Registration (\$150)

- Please list below ALL locations where you will be dispensing prescription drugs, devices and controlled substances.
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- Include a copy of your DEA license if you are requesting dispensing of controlled substances at any location.

**PLEASE NOTE**  
A separate DEA license must be submitted for **EACH** location where controlled substances will be dispensed and must be kept current during the registration period

<b>PRIMARY PRACTICE LOCATION:</b>				<b>DEA # FOR THIS LOCATION:</b> [REDACTED]			
Street Address			City/State/Zip Code				
5771 W. Eugie			Glendale, AZ 85304				
Phone Number				Fax Number		E-Mail	
623-934-7006				623-937-3014		[REDACTED]	
Schedule II Drugs	<input checked="" type="checkbox"/>	Schedule III Drugs	<input type="checkbox"/>	Prescription-Only Drugs	<input type="checkbox"/>	Nubain	<input type="checkbox"/>
Schedule IV Drugs	<input checked="" type="checkbox"/>	Schedule V Drugs	<input checked="" type="checkbox"/>	Prescription Devices	<input type="checkbox"/>		<input type="checkbox"/>
<b>ADDITIONAL PRACTICE LOCATION:</b>				<b>DEA # FOR THIS LOCATION:</b> [REDACTED]			
Street Address			City/State/Zip Code				
2255 N. Wyatt Dr.			Tucson, AZ 85712				
Phone Number				Fax Number		E-Mail	
520-624-1766				520-628-3069		[REDACTED]	
Schedule II Drugs	<input checked="" type="checkbox"/>	Schedule III Drugs	<input type="checkbox"/>	Prescription-Only Drugs	<input type="checkbox"/>	Nubain	<input type="checkbox"/>
Schedule IV Drugs	<input checked="" type="checkbox"/>	Schedule V Drugs	<input checked="" type="checkbox"/>	Prescription Devices	<input type="checkbox"/>		<input type="checkbox"/>

\*\*\*\* List any additional locations on the 2<sup>nd</sup> page of this form and place a check mark here:

X

Physician's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

5/17/15

Initial registration fee: \$200.00 per physician

Renewal registration fee: \$150.00 per physician

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If you wish to pay by payment card, please complete the attached  
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**ADDITIONAL PRACTICE LOCATION:** **DEA # FOR THIS LOCATION:** [REDACTED]

Street Address		City/State/Zip Code	
1250 E. Apache #108		Tempe, AZ 85281	
Phone Number		Fax Number	
480-966-4728		480-921-8712	
Schedule II Drugs	<input checked="" type="checkbox"/>	Schedule III Drugs	<input type="checkbox"/>
Schedule IV Drugs	<input checked="" type="checkbox"/>	Schedule V Drugs	<input checked="" type="checkbox"/>
Prescription-Only Drugs		Nubain	
Prescription Devices			

**ADDITIONAL PRACTICE LOCATION:** **DEA # FOR THIS LOCATION:**

Street Address		City/State/Zip Code	
Phone Number		Fax Number	
		E Mail	
Schedule II Drugs	<input type="checkbox"/>	Schedule III Drugs	<input type="checkbox"/>
Schedule IV Drugs	<input type="checkbox"/>	Schedule V Drugs	<input type="checkbox"/>
Prescription-Only Drugs		Nubain	
Prescription Devices			

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Street Address		City/State/Zip Code	
Phone Number		Fax Number	
		E Mail	
Schedule II Drugs	<input type="checkbox"/>	Schedule III Drugs	<input type="checkbox"/>
Schedule IV Drugs	<input type="checkbox"/>	Schedule V Drugs	<input type="checkbox"/>
Prescription-Only Drugs		Nubain	
Prescription Devices			

**ADDITIONAL PRACTICE LOCATION:** **DEA # FOR THIS LOCATION:**

Street Address		City/State/Zip Code	
Phone Number		Fax Number	
		E Mail	
Schedule II Drugs	<input type="checkbox"/>	Schedule III Drugs	<input type="checkbox"/>
Schedule IV Drugs	<input type="checkbox"/>	Schedule V Drugs	<input type="checkbox"/>
Prescription-Only Drugs		Nubain	
Prescription Devices			

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Street Address		City/State/Zip Code	
Phone Number		Fax Number	
		E Mail	
Schedule II Drugs	<input type="checkbox"/>	Schedule III Drugs	<input type="checkbox"/>
Schedule IV Drugs	<input type="checkbox"/>	Schedule V Drugs	<input type="checkbox"/>
Prescription-Only Drugs		Nubain	
Prescription Devices			

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Street Address		City/State/Zip Code	
Phone Number		Fax Number	
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Schedule II Drugs	<input type="checkbox"/>	Schedule III Drugs	<input type="checkbox"/>
Schedule IV Drugs	<input type="checkbox"/>	Schedule V Drugs	<input type="checkbox"/>
Prescription-Only Drugs		Nubain	
Prescription Devices			

ORENSTEIN, DAVID H MD  
5651 N. 7TH STREET  
PHOENIX, AZ 85014-0000-000



DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
[REDACTED]	12-31-2015	\$731
SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
2,2N, 3N,4,5,	PRACTITIONER	11-05-2012
ORENSTEIN, DAVID H MD PPAZ 2255 N WYATT DR TUCSON, AZ 85712-0000		

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

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[REDACTED]	12-31-2015	\$731
SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
2,2N, 3N,4,5,	PRACTITIONER	11-05-2012
ORENSTEIN, DAVID H MD PPAZ 2255 N WYATT DR TUCSON, AZ 85712-0000		

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PHOENIX, AZ 85014-0000-000



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[REDACTED]	12-31-2015	\$731
SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
2,2N, 3N,4,5,	PRACTITIONER	11-05-2012
ORENSTEIN, DAVID H MD PPAZ 1250 E APACHE #108 TEMPE, AZ 85281-0000		

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ORENSTEIN, DAVID H MD PPAZ 1250 E APACHE #108 TEMPE, AZ 85281-0000		

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 PPAZ  
 5651 N. 7TH STREET  
 PHOENIX, AZ 85014-0000-000



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[REDACTED]	12-31-2015	\$731
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2,2N, 3,3N,4,5,	PRACTITIONER	11-01-2012
ORENSTEIN, DAVID H PPAZ 5771 W. EUGIE GLENDALE, AZ 85304-0000		

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ORENSTEIN, DAVID H PPAZ 5771 W. EUGIE GLENDALE, AZ 85304-0000		

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