extension of time (but not more than two years) for achieving compliance.

Section 605 of the PROTECT Act, relating to the inclusion of child pornography production and distribution offenses as registration offenses under section 14071(a)(3)(A), went into effect at the time of its enactment on April 30, 2003. Byrne Formula Grant awards to States that are not in compliance with this requirement are subject to a mandatory 10% reduction in light of section 14071(f)(2). States are encouraged to submit information concerning existing or proposed provisions that comply with this requirement as soon as possible, if they have not already done so, in order to enable the reviewing authority to assess the status of State compliance and to suggest any necessary changes to achieve compliance.

In some instances, States have already submitted information bearing on their registration program's compliance with the offense coverage requirements of section 605 of the PROTECT Act, and the reviewing authority may already have reviewed such submissions in order to assist the States as promptly as possible, even prior to the issuance of formal guidelines. While these earlier reviews must be understood as provisional in character, and subject to further review under these guidelines as necessary or appropriate, no further submission may be needed from States which already provided information to the reviewing authority for purposes of review. However, in light of the articulation of standards in these guidelines, such States should review offense coverage under their existing or proposed registration provisions, and should supplement their previous submissions if necessary. As noted above, States which have not yet submitted information to the reviewing authority bearing on compliance with section 605 of the PROTECT Act should do so as soon as possible.

If a State's Byrne Formula Grant funding is reduced because of a failure to comply with the amendments enacted by section 604 or 605 of the PROTECT Act, the State may regain eligibility for full funding in later program years by establishing compliance with all applicable standards of the Wetterling Act in such later years. As noted above, the general guidelines for the Wetterling Act were published on January 5, 1999, and appear at 64 FR 572 (with corrections at 64 FR 3590, January 22, 1999), and supplementary guidelines for the Campus Sex Crimes Prevention Act amendment to the Wetterling Act were published on October 25, 2002, and appear at 67 FR 65598. The PROTECT Act amendments which these supplementary guidelines address are only parts of the Wetterling Act's standards. To maintain eligibility for full Byrne Formula Grant funding, States must comply with all of the Wetterling Act's standards.

After the reviewing authority has determined that a State is in compliance with the Wetterling Act, the State has a continuing obligation to maintain its system's consistency with the Wetterling Act's standards, and will be required as part of the Byrne Formula Grant application process in subsequent program years to certify that the State remains in compliance with the Wetterling Act.

Dated: March 7, 2005.

Alberto R. Gonzales,

Attorney General.

[FR Doc. 05–5021 Filed 3–14–05; 8:45 am]

BILLING CODE 4410–18–P

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

[Docket No. 04–65]

Glenn Anthony Routhouska, D.O.; Denial of Registration

On April 29, 2004, the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration (DEA), issued an Order to Show Cause to Glenn Anthony Routhouska, D.O. (Respondent), proposing to deny his application for a DEA Certificate of Registration as a practitioner pursuant to 21 U.S.C. 823(f) as being inconsistent with public interest. The Order to Show Cause also notified Respondent that should no request for a hearing be filed within 30 days, his hearing right would be waived.

The Order to Show Cause was sent by certified mail to Respondent at his address of record at 106 North Keech, Fairfield, Texas 75840. According to the return receipt, it was received on Respondent's behalf on May 5, 2004. After more than 30 days had passed without a request for a hearing or other response from Respondent or anyone acting on his behalf, the investigative file was forwarded to the DEA Deputy Administrator for final agency action pursuant to 21 CFR 1301.43(d) and (e).

Prior to final action being completed, Respondent, unrepresented by counsel, filed a belated request for a hearing in a letter which was received by the DEA Office of Administrative Law Judges on August 20, 2004. In it he stated he was on probation with the Texas State Board of Medical Examiners and that upon initially reading the Order to Show Cause, he thought ''that a hearing was useless until I was off probation.'' On September 8, 2004, at the Government's request, the investigative file was returned to the Office of Chief Counsel for further action.

On August 30, 2004, because Respondent's request for a hearing was filed nearly four months after the Order to Show Cause had been issued, Administrative Law Judge Mary Ellen Bittner issued a Memorandum to the Parties affording the Government an opportunity to object to Respondent's request for a hearing.

On September 9, 2004, the Government filed a motion to deny Respondent request for a hearing and on September 24, 2004, Judge Bittner issued her Memorandum to the Parties, Ruling, and Order Terminating the Proceedings. In that Order, she concluded Respondent had failed to show good cause for the belated filing and granted the Government's motion, terminating proceedings before the Administrative Law Judge and ordering the matter transmitted to the Deputy Administrator for issuance of a final order pursuant to 21 CFR 1316.67. On January 10, 2005, the investigative file and related documents were returned by the Chief Counsel to the Deputy Administrator for final agency action.

The Deputy Administrator finds as follows: (1) Respondent was properly served with the Order to Show Cause and notified that if no request for a hearing was filed within 30 days of its receipt, his hearing right would be deemed waived and a final order entered, without a hearing, based upon the investigative file and record as it then appeared; (2) respondent's request for a hearing was not filed until August 20, 2004, almost two and one-half months after expiration of the 30 day filing deadline; and (3) the Administrative Law Judge granted the Government's motion to deny a hearing and ordered the proceeding terminated. The Deputy Administrator therefore concludes Respondent is deemed to have waived his hearing right and after considering material from the investigative file and record in this matter, now enters her final order without a hearing, pursuant to 21 CFR 1301.43(d) and (e) and 1316.67.

According to information in the investigative file, Respondent, who practiced family medicine out of his office in Fairfield, Texas, was previously registered with DEA as a practitioner under Certificate of Registration BR206348, authorized to handle Schedule II through V controlled

substances. On February 21, 2002, he surrendered that registration, for cause. Less than a year later, on January 27, 2003, Respondent submitted the application which is the subject of these proceedings.

In February 2002, based on information provided by a local pharmacy that was suspicious of his activities, the Texas Department of Public Safety (DPS) and DEA began investigating Respondent for diverting hydrocodone, a Schedule III controlled narcotic substance. The inquiry uncovered the following facts.

On an undetermined date prior to February 14, 2002, Respondent prescribed Vicodin, a form of hydrocodone, to patient M.H. After the Vicodin was dispensed, Respondent asked the patient to bring the prescription to his office, which she did. Asking to ''see'' the prescription, he took the vial out of the examining room and replaced the Vicodin with a non-controlled medication without telling the patient what he had done.

On February 14, 2002, Respondent prescribed Vicodin to patient T.S., who was 89 years old. After the Vicodin had been dispensed by a local pharmacy, Respondent visited the patient at his home, ostensibly to check on the medication. He then surreptiously replaced the Vicodin in the vial with Tylenol, non-controlled generic acetaminophen caplets, diverting the Vicodin for his own unauthorized use.

On February 20, 2002, Respondent was interviewed by a DEA diversion investigator and a DPS officer about the incident at patient T.S.'s home. During the interview Respondent falsely told investigators the patient's wife and daughter had asked him to switch the hydrocodone to Tylenol because they feared T.S. was taking too much hydrocodone. Respondent also falsely told officers that he had disposed of the hydrocodone by flushing it down a toilet in his medical office.

Between May 15, 2000, and July 10, 2000, Respondent purchased at least 1,000 dosage units of hydrocodone. When questioned, he initially told investigators they were provided as samples but later admitted buying them. He could only provide investigators an incomplete dispensing log and was unable to account for about half of the total dosage units. Respondent claimed that some had been stolen, but conceded not reporting the purported thefts. He also did not have purchase receipts for the hydrocodone, nor did he conduct a required a biennial inventory of controlled substances.

On February 21, 2002, as a result of the foregoing, Respondent surrendered his DEA registration and his Texas DPS controlled substance registration.

Two weeks later, on March 8, 2002, Respondent advised an elderly patient that he needed to stop by her home, ostensibly to check on some hydrocodone he had prescribed before surrendering his DEA and State registrations. However, the patient had become suspicious of Respondent because when he made house calls, large amounts of her prescribed pain medications would disappear. On one occasion her daughter saw him transferring Vicodin from its prescription vial to some sample bottles he brought to the home and took with him.

Officers were contacted and they set up an operation to monitor the visit. Respondent arrived at the patient's home and while there, he surreptitiously removed 32 of the 92 dosage units of hydrocodone which were in her prescription vial. He was then arrested by State authorities shortly after leaving the residence with the 32 units in his possession. During questioning, Respondent admitted stealing the drugs and divulged being addicted to hydrocodone. He was initially charged in State court with a felony count of obtaining a controlled substance by fraud.

On March 24, 2002, while awaiting disposition of his case, Respondent entered a one-month residential drug treatment program. He was discharged on April 24, 2002, and the program's discharge summary indicated Respondent's treatment was ''satisfactory'' and his prognosis ''fair.''

On July 3, 2002, Respondent entered a plea agreement in the 87th District Court of Freestone County, Texas, in which he pled guilty to one count of unlawful possession of a controlled substance, a Class A misdemeanor. He was eventually sentenced to three years probation and fined $4,000.

On August 15, 2003, Respondent entered into an Agreed Order with the Texas State Board of Medical Examiners which publicly reprimanded him for unprofessional conduct and placed him on probation. However, the Board did not suspend or revoke his license to practice medicine. On July 2, 2003, Texas DPS reissued Respondent a State controlled substance registration for Schedules IIN, IIIN, IV and V.

Pursuant to 21 U.S.C. 823(f), the Deputy Administrator may deny an application for a DEA Certificate of Registration if she determines that registration would be inconsistent with the public interest. Section 823(f) requires the following factors be considered in determining the public interest:

(1) The recommendation of the appropriate State licensing board or professional disciplinary authority.

(2) The applicant's experience in dispensing, or conducting research with respect to controlled substances.

(3) the applicant's conviction record under Federal or State laws relating to the manufacture, distribution, or dispensing of controlled substances.

(4) Compliance with the applicable State, Federal, or local laws relating to controlled substances.

(5) Such other conduct which may threaten the public health or safety.

These factors are to be considered in the disjunctive; the Deputy Administrator may relay on any one or a combination of factors and may give each factor the weight she deems appropriate in determining whether a registration should be revoked or an application for registration denied. *See* Henry J. Schwartz, Jr., M.D., 54 FR 16,422 (1989).

In this case, the Deputy Administrator finds factors two, three, four and five relevant in determining whether or not granting Respondent's application would be consistent with the public interest.

As to factor one, the recommendation of the appropriate State licensing board or professional disciplinary authority, there is evidence in the investigative file of adverse action being taken against respondent's professional license and at one point he surrendered his State controlled substances registration. However, he is currently licensed to practice medicine in Texas and his registration to handle controlled substances under State law was reinstated, which weight in favor of registration. However, inasmuch as State license is a necessary but not sufficient condition for DEA registration, this factor is not determinative. *See* Dan E. Hale, D.O., 69 FR 69402 (2004); Edson W. Redard, M.D., 65 FR 30616, 30619 (2000); James C. LaJevic, D.M.D., 64 FR 55962, 55964 (1999).

With respect to factors two, three, four and five, the Deputy Administrator finds respondent flagrantly abused his responsibilities as a registrant and physician. On multiple occasions he prescribed controlled substances to his elderly patients and used his position of trust and authority to gain physical access to their medications after they were dispensed by local pharmacies. He would steal his patients' controlled substances, often by leaving non-controlled caplets in their prescription bottles and would use the stolen drugs

for self-abuse. On multiple occasions, Respondent gained access to patients' homes in order to accomplish the thefts, a particularly heinous modus operandi for a trusted family physician.

Respondent also failed to maintain adequate records of controlled substances as required by DEA regulations and finally, was convicted pursuant to his plea agreement of a State misdemeanor involving controlled substances.

While the investigative file reflects Respondent sought treatment for his addiction, albeit while criminal charges were pending, and he has undergone successful follow-up random drug testing, the egregious nature of his misconduct bears directly upon his fitness to posses a DEA registration. In sum, applying factors two through five above, Respondent's abandonment of his patients' medical interests and flaunting of their personal trust to divert controlled substances to his personal use, coupled with his flagrant violations of law and regulation, all lead to the inevitable conclusion that granting this application would be inconsistent with the public interest.

Accordingly, the Deputy Administrator of the Drug Enforcement Administration, pursuant to the authority vested in her by 21 U.S.C. 823 and 28 CFR 0.100(b) and 0.104, hereby orders that the application of Glenn Anthony Routhouska, D.O., for a DEA Certificate of Registration, be, and it hereby is denied. This order is effective April 14, 2005.

Dated: February 14, 2005.

Michele M. Leonhart,

Deputy Administrator.

[FR Doc. 05–5071 Filed 3–14–05; 8:45 am]

BILLING CODE 4410–09–M

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Margaret Melinda Sprague, M.D.; Revocation of Registration

On September 8, 2004, the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration (DEA), issued an Order to Show Cause to Margaret Melinda Sprague, M.D. (Dr. Sprague) who was notified of an opportunity to show cause as to why DEA should not revoke her DEA Certificate of Registration BS1464089, pursuant to 21 U.S.C. 824(a)(3) and deny any pending applications under 21 U.S.C. 823(f), on the ground that she lacks State authority to handle controlled substances in the State of California. The Order to Show Cause also notified Dr. Sprague that should no request for a hearing be filed within 30 days, her hearing right would be deemed waived.

The Order to Show Cause was sent by certified mail to Dr. Sprague at her registered address in La Jolla, California. However that letter was unclaimed. It was then forwarded by the United States Postal Service to 7934 La Jolla Shores Drive, La Jolla, California 92037, an address Dr. Sprague had provided postal authorities as a forwarding address. She had also previously advised DEA investigators to use that address when sending correspondence related to her registration. However, the forwarded letter was also unclaimed and postal authorities returned it to DEA stamped ''Notice Left—No Response.'' Additional efforts by DEA investigators to locate Dr. Sprague's current address were also unsuccessful. DEA has not received a request for hearing or any other reply from Dr. Sprague or anyone purporting to represent her in this matter.

Therefore, the Deputy Administrator of DEA, finding that: (1) Thirty days having passed since the attempted deliveries of the order to Show Cause to the Registrant's address of record and her forwarding address; (2) reasonable and good faith efforts to locate her have been unsuccessful; and (3) no request for hearing having been received, concludes that Dr. Sprague is deemed to have waived her hearing right. *See* James E. Thomas, M.D., 70 FR 3564 (2005); Steven A. Barnes, M.D., 69 FR 51474 (2004); David W. Linder, 67 FR 12579 (2002). After considering material from the investigative file in this matter, the Deputy Administrator now enters her final order without a hearing pursuant to 21 CFR 1301.43(d) and (e) and 1301.46.

The Deputy Administrator finds that Dr. Sprague is currently registered with DEA as a practitioner authorized to handle controlled substances in Schedules II through V under Certificate of Registration BS1464089, expiring on February 28, 2006. According to information in the investigative file on December 3, 2003, the Medical Board of California (Board) issued an Order immediately suspending Dr. Sprague's Physician and Surgeon's Certificate. The suspension was based in part, on the Board's conclusion that Dr. Sprague was unable to safely practice medicine due to a mental or physical condition.

There is no evidence before the Deputy Administrator to rebut a finding that Dr. Sprague's California medical license has been suspended. Therefore, The Deputy Administrator finds Dr. Sprague is currently not authorized to practice medicine in the State of California. As a result, it is reasonable to infer that she is also without authorization to handle controlled substances in that State.

DEA does not have statutory authority under the Controlled substances Act to issue or maintain a registration if the applicant or registrant is without State authority to handle controlled substances in the State in which she conducts business. *See* 21 U.S.C. 802(21), 823(f) and 824(a)(3). This prerequisite has been consistently upheld. *See* Richard J. Clement, M.D., 68 FR 12103 (2003); Dominick A. Ricci, M.D., 58 FR 51104 (1993); Bobby Watts, M.D., 53 FR 11919 (1988).

Here, it is clear that Dr. Sprague's State medical license was suspended and there is no information before the Deputy Administrator which points to that suspension having been lifted or stayed. As a result, Dr. Sprague is not authorized to practice medicine or handle controlled substances in California, where she is registered with DEA. Therefore, she is not entitled to maintain that registration.

Accordingly, the Deputy Administrator of the Drug Enforcement Administration, pursuant to the authority vested in her by 21 U.S.C. 823 and 824 and 28 CFR 0.100(b) and 0.104, hereby orders that DEA Certificate of Registration, BS1464089, issued to Margaret Melinda Sprague, M.D., be, and it hereby is, revoked. The Deputy Administrator further orders that any pending applications for renewal or modification of the aforementioned registration be, and hereby are, denied. This order is effective April 14, 2005.

Dated: February 14, 2005.

Michele M. Leonhart,

Deputy Administrator.

[FR Doc. 05–5073 Filed 3–14–05; 8:45 am]

BILLING CODE 4410–09–M

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

Titan Wholesale, Inc.; Denial of Registration

On October 13, 2004, the Deputy Assistant Administrator, Office of Division Control, Drug Enforcement Administration (DEA), issued an Order to Show Cause to Titan Wholesale, Inc. (Titan) proposing to deny its August 14, 2003, application for DEA Certificate of Registration as a distributor of list I chemicals. The Order to Show Cause alleged that granting Titan's application would be inconsistent with the public interest, as that term is used in 21 U.S.C. 823(h). The order also notified Titan