

Markvicka Taunia
 Form 3
 March 29, 2012

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Markvicka Taunia		(Month/Day/Year)	Pacira Pharmaceuticals, Inc. [PCRX]	
(Last)	(First)	(Middle)	03/21/2012	
C/O PACIRA PHARMACEUTICALS, INC.,Â 5 SYLVAN WAY, SUITE 100			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	
			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
			(give title below)	(specify below)
			Vice President, Commercial	
				6. Individual or Joint/Group Filing(Check Applicable Line)
				<input checked="" type="checkbox"/> Form filed by One Reporting Person
				<input type="checkbox"/> Form filed by More than One Reporting Person

PARSIPPANY,Â NJÂ 07054

(City) (State) (Zip)

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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 control number.

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Employee Stock Option (right to buy)	Â (1)	09/01/2020	Common Stock	21,385	\$ 1.61	D	Â
Employee Stock Option (right to buy)	Â (2)	09/01/2020	Common Stock	29,754	\$ 1.61	D	Â
Employee Stock Option (right to buy)	Â (3)	12/28/2020	Common Stock	18,349	\$ 5.49	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Markvicka Taunia C/O PACIRA PHARMACEUTICALS, INC. 5 SYLVAN WAY, SUITE 100 PARSIPPANY, NJ 07054	Â	Â	Â Vice President, Commercial	Â

Signatures

/s/ Taunia
Markvicka

03/29/2012

**Signature of
Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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).
- (1) The stock option vests as follows: 25% of the shares shall vest on the one-year anniversary of the Vesting Commencement Date of September 2, 2010; 1/36th of the shares shall vest over the three year period thereafter.
 - (2) The stock option vests as follows: 50% of the shares are vested upon the date of grant; 50% of the remaining shares shall vest in monthly installments over the next 24 months.
 - (3) The stock option vests as follows: 25% of the shares shall vest on the one-year anniversary of the Vesting Commencement Date of December 29, 2010; 1/36th of the shares shall vest over the three year period thereafter.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.