FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number: 3235-028									
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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Name and Address of Reporting Person* SHALLISH ROBERT D JR						2. Issuer Name and Ticker or Trading Symbol CONMED CORP [CNMD]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
	3. Date of Earliest Transaction (Month/Day/Year)								\neg	Direct		10% Owner								
(Last)	(Firs	st) (N	(liddle			03/05/2013								X below	r (give title		Other (s	specify		
C/O CONMED CORP														Vice	e Presiden	nt/Fina	ance/CFC)		
525 FRENCH ROAD					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														,	filed by On	e Repo	ortina Pers	on		
UTICA	NY	1	3502-	5994										X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Sta	ite) (Z	ip)																	
		Table	e I - N	lon-Deriv	ative \$	Secu	uriti	es Acc	uired,	Dis	posed o	f, or Be	neficial	ly Owne	d					
1. Title of Security (Instr. 3)			2. Transacti Date (Month/Day		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3 and 5)			Securit Benefic Owned	ies cially	Form (D) o	n: Direct r ect (I)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price			(Instr	·. 4)	(Instr. 4)		
Common Stock 0					013				М		10,000	0 A	\$19.9	3 44,391		D				
Common Stock			03/05/2013				F		7,773	7,773 D		3 36,618			D					
Common Stock				03/05/2013				М		6,000	A	\$16.4	6 42	42,618		D				
Common Stock				03/05/20	013			F		4,231	31 D \$		3 38,387		D					
Common Stock 03/05/2				03/05/20	013			M		5,600	5,600 A \$		6 43,987			D				
Common Stock 03/05/20				013		F		4,275	D	\$30.6	39	39,712		D						
			Tab	le II - Deriv (e.g.,							osed of, o			wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year) Execution Date, if any (Month/Day/Year) Securior Acquired (A) or Disport of (D) (Instr.		Transa Code (6. Date Exercis Expiration Dat (Month/Day/Ye		te Amount of		of s ng	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s illy g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership			
					(D)			Expiration Date	Amount or Number of Shares											
Sars (Stock Appreciation Rights)	\$19.93	03/05/2013			M			10,000	(1)		05/16/2016	Common Stock	10,000	\$0	0		D			
Sars (Stock Appreciation Rights)	\$16.46	03/05/2013			M			6,000	(2)		06/01/2019	Common Stock	6,000	\$0	4,000)	D			
Sars (Stock Appreciation Rights)	\$19.26	03/05/2013			M			5,600	(2)		06/01/2020	Common Stock	5,600	\$0	8,400)	D			

Explanation of Responses:

- 1. The stock appreciation rights ("SARs") were granted under the Issuer's 2006 Stock Incentive Plan and generally vest in equal amounts over a five year period.
- 2. The stock appreciation rights ("SARs") were granted under the Company's 1999 Amended and Restated Long-Term Incentive Plan and generally vest in equal amounts over a five year period.

Daniel S. Jonas for Robert D. 03/06/2013 Shallish by Power of Attorney

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.