FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

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

	Address of Repo	rting Person [*]	2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol CONMED CORP [CNMD]					
(Last) (First) (Middle) 105 ARLINGTON ROAD			06/02/2008		4. Relationship of Reporting Person(s) to Is (Check all applicable) Director 10% Ow X Officer (give title below) below)		(Mon	If Amendment, Date of Original Filed onth/Day/Year) Individual or Joint/Group Filing (Check plicable Line)		
(Street) UTICA (City)	NY (State)	13501 (Zip)			VP-Corp HR & Deputy Gen. Couns		X	X Form filed by One Reporting Person Form filed by More than One Reporting Person		
			Table I - No	n-Derivati	ive Securities Beneficial	ly Owned				
1. Title of Security (Instr. 4)				2	. Amount of Securities eneficially Owned (Instr. 4)	3. Ownersh Form: Direct or Indirect ((Instr. 5)	t (D) (Instr.	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock					2,570	D				
Common Stock					300	I	spouse			
					Securities Beneficially nts, options, convertible		s)		,	
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable an Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Exercise Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		
Stock Optio	ock Options		03/07/2003	03/07/2012	Common Stock	4,000	22.25	D		
Stock Option	tock Options		05/14/2003	05/14/2012	Common Stock	1,200	25.89	D		
Stock Option	tock Options		05/20/2004	05/20/2013	Common Stock	4,000	17.74	D		
Stock Option	tock Options		05/18/2005	05/18/2014	Common Stock	5,000	25.03	D		
Stock Option	Stock Options		05/17/2006	05/17/2015	Common Stock	5,000	31.4	D		
RSUs (Rest	SUs (Restricted Stock Units)(1)		05/16/2007 ⁽¹⁾	05/16/2016 ⁽	Common Stock	600	(3)	D		
SARs (Stoc	ARs (Stock Appreciation Rights) ⁽²⁾		05/16/2007 ⁽²⁾	05/16/2016 ⁽	Common Stock	2,500	19.93	D		
SARs (Stoc	ARs (Stock Appreciation Rights)(2)		05/17/2008 ⁽²⁾	05/17/2017 ⁽	2) Common Stock	2,500	29.92	D		
RSUs(Restr	RSUs(Restricted Stock Units) ⁽¹⁾		05/17/2008 ⁽¹⁾	05/17/2017 ⁽	Common Stock	800	(3)	D		
SARs (Stock Appreciation Rights) ⁽²⁾		06/01/2009 ⁽²⁾	06/01/2018 ⁽	2) Common Stock	2,500	26.69	D			
RSUs (Rest	RSUs (Restricted Stock Units) ⁽¹⁾		06/01/2009 ⁽¹⁾	06/01/2018 ⁽	Common Stock	1,000	(3)	D		
RSUs (Rest	ricted Stock Ur	nits) ⁽¹⁾	06/02/2009 ⁽¹⁾	06/02/2018	Common Stock	3,000	(3)	D		

Explanation of Responses:

- 1. Each restricted stock unit ("RSU") represents a contingent right to receive one share of common stock, par value \$0.01 per share of ConMed Corporation (the "Company") and will be subject to the terms and conditions of the Company's 2006 Stock Incentive Plan, with the RSUs vesting in equal amounts over a ten year period.
- 2. The stock appreciation rights ("SARs") were granted under the Company's 2006 Stock Incentive Plan and generally vest in equal amounts over a five year period.
- 3. The RSUs and SARs were granted at no cost to the Reporting Person

Heather L. Cohen 06/04/2008

** Signature of Reporting Person

Date

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 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).

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.