FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:								

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

1. Name and Address of Reporting Person* SHALLISH ROBERT D JR						2. Issuer Name and Ticker or Trading Symbol CONMED CORP [CNMD]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 4375 OLYMPUS HEIGHTS						3. Date of Earliest Transaction (Month/Day/Year) 01/03/2006									V Office belo	,	Other (specify below)		` '	
(Street) SYRACU (City)	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person									
		Tabl	e I - I	Non-Deriv	ative	Secu	ıritie	s Ac	quired,	Dis	posed o	f, or E	ene	eficial	y Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				/Year)	Execu if any	eemed ition Date, th/Day/Year)		3. 4. Securit Transaction Disposed Code (Instr. 5)					d Secu Bene Owne	ficially ed	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	or F	Price	Repo	Following Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 01/03/2						006			Α		174	A \$20		\$20.11	11 10,672		D			
		Та	ble II	- Derivat (e.g., pu							osed of, onvertib				Owned	I				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu if any	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		umber vative urities uired or oosed 0) cr. 3, 4	6. Date Expirati (Month/	on Da		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		0 E S (I	. Price f Perivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Ind (I) (Ins 4)	(D)	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or	ount mber ares						

Explanation of Responses:

/s/ Robert D. Shallish Jr.

** Signature of Reporting Person

01/04/2006

Date

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

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.

 $^{^{\}star}$ 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).