FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
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Estimated average burden								
hours per response:	0.5							

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

Name and Address of Reporting Person*     DANIELS BRUCE						2. Issuer Name and Ticker or Trading Symbol CONMED CORP [ CNMD ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last) (First) (Middle) 5 IRONWOOD ROAD						3. Date of Earliest Transaction (Month/Day/Year) 05/16/2010										Offic belo	er (give title w)	Other below)		(specify	
						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NEW HARTFO																X Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(St	tate) (	Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Exe if a	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transact Code (In 8)	ecurities Acquired ( posed Of (D) (Instr. 3 5)			4 Secur	icially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						١	Code	v	Amou		(A) or (D)	Pric	Repor e Trans	eported ansaction(s) str. 3 and 4)		,	(				
Common	Stock	2010	010				M		20	0	A	\$	0	800		D					
Common Stock 05/18/2						2010				M		20	0 A		\$	0	1,000		D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	on Date,	4. Transact Code (In 8)	tion Number			Exp	6. Date Exercisable Expiration Date (Month/Day/Year)			nd 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		r. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	Dat (D) Exe		e rcisable	Exp	iration e	Title	or Nui of	ount mber ares						
Rsus (restricted Stock Units)	\$0	05/16/2010			M			200		(1)	05/1	16/2018	Comm Stock		00	\$0	600		D		
Rsus (restricted Stock Units)	\$0	05/18/2010			M			200		(1)	05/1	18/2017	Comm Stock		00	\$0	400		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 2007 Non-Employee Director Equity Compensation Plan, with the RSUs generally vesting 20% per year over a five year period, with any unvested RSUs to vest and be delivered upon the Director's termination of service provided the Director has completed one full year of service since the date of the award.

<u>Daniel S. Jonas for Bruce F.</u> <u>Daniels by Power of Attorney</u>

05/

05/18/2010

\*\* 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 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.