## FORM 4

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

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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*  MANDIA STEPHEN				2. Issuer Name and Ticker or Trading Symbol CONMED CORP [ CNMD ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
101/ (140)	/ CILI	<u> </u>			$\vdash$						-			X Directo	r	10% O	wner	
(Last)						3. Date of Earliest Transaction (Month/Day/Year) 06/01/2010								Officer below)	(give title	Other ( below)	specify	
12 GILBERT STREET					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street)														X Form f	led by One R	eporting Pers	on	
NEW HARTFO	RD NY	11	3413												led by More t	han One Rep		
(City)	(Sta	te) (Z	lip)															
		Table	e I - No	on-Deriva	ative S	ecu	rities	Ac	quired, E	)isp	osed of	f, or Be	neficial	ly Owned	i			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execution Date,				3. Transaction Code (Instr. ) 8)  4. Securities Acquired Disposed Of (D) (Instr. and 5)				5. Amou Securiti Benefici Owned Followi	es Fo	Ownership orm: Direct I) or direct (I)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) o	r Price	Reporte Transac (Instr. 3	d tion(s)	nstr. 4)	(Instr. 4)		
Common Stock 06/01/2					010			M		200 A		\$0	4,	950	D			
			Table						uired, Dis					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	ion Date,	4. Transaction Code (Instr. 8)		Number		6. Date Exercisa Expiration Date (Month/Day/Yea		Amount of		of s ng e	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.	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares	1				
Rsus (restricted Stock Units)	\$0	06/01/2010			M			200	(1)	(	06/01/2019	Common Stock	200	\$0	800	D		
Rsus (restricted Stock Units)	\$0	06/01/2010			A		2,000		06/01/2011	2)	06/01/2020	Common Stock	2,000	\$0	2,000	D		
Sars (Stock Appreciation Rights)	\$19.26	06/01/2010			A		1,000		06/01/2011	(3)	06/01/2020	Common Stock	1,000	\$0	1,000	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 Amended and Restated 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.
- 2. 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 Amended and Restated Non-Employee Director Equity Compensation Plan, with the RSUs generally vesting 100% after a one year period.
- 3. The stock appreciation rights ("SARs") were granted under the Company's 2007 Amended and Restated Non-Employee Director Equity Compensation Plan, with the SARs generally vesting 100% after a one year period.

Daniel S. Jonas for Stephen M. Mandia by Power of Attorney

\*\* Signature of Reporting Person Da

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.

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