FORM 4

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

Washington, D.C. 20549

OMB APPROVAL								
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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

1. Name and Address of Reporting Person*  CORASANTI EUGENE R									er or Tradi	_	,		tionship of l all applicab Director		ng Per	son(s) to I				
(Last) 9 CARMEN	(First)	(1		3. Date of Earliest Transaction (Month/Day/Year) 05/16/2006										Officer (gi below) Chairm		e title Other below n of Board and CE		specify		
(Street) UTICA (City)	NY (State		.3501 Zip)		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv Line) X	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day						Execution Date			,	Transaction Disposed Code (Instr. and 5)			ties Acqui I Of (D) (Ir			5. Amount Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
			Code	v	Amount				(A) o (D)	F	Price	Reported Transaction (Instr. 3 and		(1130. 4)		(Instr. 4)				
Common Sto												259,09	259,096		D					
Common Stock																63,78	63,787		I	Spouse
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)	any	ned n Date, if Day/Year)	4. Transaction Code (Instr. 8)		5. Number Derivative Securities Acquired Disposed (Instr. 3, 4	e s I (A) or i of (D)	6. Date Exercisable and Expiration Date (Month/Day/Year)				7. Title and Securities I Derivative 9 and 4)	Jnde		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securiti Benefic Owned Followir Reporte Transac	ve es ially ng ed	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e ercisable	Exp Dat	iration e	Title		Amount of Number of Shares		(Instr. 4			
RSUs (Restricted Stock Units) <sup>(1)</sup>	(1)	05/16/2006			A	25,000			05/	16/2007 <sup>(1)</sup>	05/	16/2016 <sup>(1)</sup>	Common	1	25,000 \$0		25,000		D	
SAR's (Stock Appreciation Rights) <sup>(2)</sup>	\$19.93	05/16/2006					62,500		05/	16/2007 <sup>(2)</sup>	05/	16/2016 <sup>(2)</sup>	Common stock	1	62,500	2,500 \$0(3)		500	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 generally vesting over a five year period with the first 20% of the RSU's vesting one year after the grant date.
- 2. 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.
- 3. The SARs were granted at no cost to the Reporting Person.

<u>/s/ Eugene R. Corasanti</u> <u>05/18/2006</u>

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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).

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.