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

1. Name and Address of Reporting Person* DANIELS BRUCE						2. Issuer Name and Ticker or Trading Symbol CONMED CORP [CNMD]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last)	, , , , , , , , , , , , , , , , , , , ,							3. Date of Earliest Transaction (Month/Day/Year) 02/04/2011									(Other (specify below)	
5 IRONWOOD ROAD (Street) NEW HARTFORD NY 13413					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta	ate) (Z	Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/V					/Year)	Execution Date,			Transaction Dispose Code (Instr. 5)			ties Acquired (A) o d Of (D) (Instr. 3, 4 a			nd Se Be Ov	Amount of curities eneficially vned ellowing	6. Owner Form: Di (D) or Indirect ((Instr. 4)	rect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
		Code V		Amount	(A) or (D)				Price	Re Tr	eported ansaction(s) str. 3 and 4)	, ,,		,					
Common Stock 02/04/20						11			S		562	I) \$	526. 1	16	0			spouse
Common Stock 02/04/20)11				S		400	I) :	\$26.38		800			
	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)	. Title of 2. 3. Transaction Date Executio (Month/Day/Year) if any		eemed ition Date,	4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) o Dispo of (D) (Instr	rative rities pired r osed) : 3, 4	6. Date I Expirati (Month/	Exerc on Da Day/Y	isable and ate 'ear)	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		str.	8. Price of Derivat Securit (Instr. §	derivative Securities y Beneficiall	Owne Form Direct or Ind (I) (In:	(D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Code	Code V (A) (D)				Exercisable Date			Snai	res									

Explanation of Responses:

Daniel S. Jonas for Bruce F. Daniels by Power of Attorney

02/07/2011

** Signature of Reporting Person

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).