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* Johnson David Allen						2. Issuer Name and Ticker or Trading Symbol CONMED CORP [CNMD]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 4670 HARTSFIELD PLACE						3. Date of Earliest Transaction (Month/Day/Year) 02/08/2010									X	belov	,	be	Other (specify below) Operations		
(Street) MANLIU (City)	S NY 13104 (State) (Zip)				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									i. Indiv ine) X	idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Table	e I	- Non-Deriv	ativ	e Seci	uritie	es A	cquir	ed, I	Di	sposed o	f, or E	Benefici	ally	Owne	ed				
1. Title of Security (Instr. 3) 2. Trans Date (Month)					Executio ear) if any				3. Transaction Code (Instr. 8)			4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			and 5) Secu Bene Own		ficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v		Amount	(A) or (D) Price		Repo Trans			(111341 - 47)		(IIISU. 4)	
Common	Stock	02/08/201	0							468	D	\$22.1013(1)		0		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)	e Execution Date, 1 if any (Month/Day/Year) 8			s. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3 and 5)		ivativuritie uritie uired or posed D) tr. 3,	Expiration (Month/Dayes d			y/Year) Securities Underlying Derivative Security (Instr 3 and 4) Amoun or Numbo of		nt of ties lying tive ty (Instr. 4) Amount or Number			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (I or Indir (I) (Instr 4)	nip () ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

1. Full information regarding the number of shares sold at each seperate price will be provided upon request of the Commission staff, CONMED, or a CONMED security holder.

Remarks:

<u>Daniel S. Jonas for David A.</u> Johnson by Power of Attorney <u>02</u>

02/09/2010

** 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.