FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden

0.5

hours per response:

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 [*] CONCANNON BRIAN						2. Issuer Name and Ticker or Trading Symbol <u>CONMED CORP</u> [CNMD]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last)					3. Date of Earliest Transaction (Month/Day/Year) 07/30/2013										give title		Other (specify below)	
C/O CONMED CORPORATION 525 FRENCH ROAD						4. If Amendment, Date of Original Filed (Month/Day/Year) 07/30/2013								6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) UTICA														Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)																		
		Table	e I - No	on-Deriva	ative S	ecu	iritie	s Ac	quired,	Dis	posed o	f, or Be	neficia	lly Owned	d			
1. Title of Security (Instr. 3) Date (Month/Day				Execution Date,			Transaction Dispose Code (Instr. and 5)		rities Acquired (A) ed Of (D) (Instr. 3, 4		Securiti Benefic Owned	es ially	s Form Ily (D) o Indir		7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount	Amount (A) or (D)		Reporte Transac	Following Reported Transaction(s) (Instr. 3 and 4)		·. 4)	(Instr. 4)			
		Та	ble II ·								osed of, convertit			y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution if any	. Deemed 4 ecution Date, T		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Ex Expiratior (Month/Da	n Dat	e			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares					
Rsus (restricted Stock Units)	\$0								06/01/2014	(1)	07/26/2023	Common Stock	3,000		3,000		D	
Sars (Stock Appreciation Rights)	\$33.43								06/01/2014	(2)	07/26/2023	Common Stock	1,000		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 100% after a one year period.

2. 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.

Remarks:

Attaching Power of Attorney. There is no change to Table II

Daniel S. Jonas for Brian
Concannon by Power of
Attorney

08/02/2013

** 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.

DURABLE GENERAL POWER OF ATTORNEY NEW YORK STATUTORY SHORT FORM

THE POWERS YOU GRANT BELOW CONTINUE TO BE EFFECTIVE SHOULD YOU BECOME DISABLED OR INCOMPETENT

CAUTION: THIS IS AN IMPORTANT DOCUMENT. IT GIVES THE PERSON WHOM YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY DURING YOUR LIFETIME, WHICH MAY INCLUDE POWERS TO MORTGAGE, SELL, OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTYWITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THESE POWERS WILL CONTINUE TO EXIST EVEN AFTERYOU BECOME DISABLED OR INCOMPETENT. THESE POWERS ARE EXPLAINED MORE FULLY IN NEW YORK GENERAL OBLIGATIONS LAW, ARTICLE 5, TITLE 15, SECTIONS 5-1502A THROUGH 5-1503, WHICH EXPRESSLY PERMIT THE USE OF ANY OTHER OR DIFFERENT FORM OF POWER OF ATTORNEY.

THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS. YOU MAY EXECUTE A HEALTH CARE PROXY TO DO THIS.

IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.

THIS is intended to constitute a DURABLE GENERAL POWER OF ATTORNEY pursuant to Article 5, Title 15 of the New York General Obligations Law:

I, Brian Concannon, residing at PO Box 326, Norwell, Massachusetts, 02061 do hereby appoint:

Daniel S. Jonas, Esq., Executive Vice President - Legal Affairs and General Counsel Robert D. Shallish, Jr., Executive Vice President ? Finance and Chief Financial Officer Heather L. Cohen, Esq., Executive Vice President Corporate HR and Deputy General Counsel Simone Shaheen, Esq., Assistant General Counsel (If 1 person is to be appointed agent, insert the name and address of your agent above) (If 2 or more persons are to be appointed agents by you insert their names and addresses above)

my attorney(s)-in-fact TO ACT

(If more than one agent is designated, CHOOSE ONE of the following two choices by putting your initials in ONE of the blank spaces to the left of your choice:)

[Intl.] Each agent may SEPARATELY act.
[] All agents must act TOGETHER.

(If neither blank space is initialed, the agents will be required to act TOGETHER)

IN MY NAME, PLACE AND STEAD in any way which I myself could do, if I were personally present, with respect to the following matters as each of them is defined in Title 15 of Article 5 of the New York General Obligations Law to the extent that I am permitted by law to act through an agent:

[Intl.] Execution of Documents used to report on the Exercise of Options and/or Sale of Conmed Common Stock, including but not limited to any SEC Form 4, SEC Form 5, SEC Form 144, or any agreement which limits or delays the sale orpurchase of Conmed Common Stock.

(Special provisions and limitations may be included in the statutory short form durable power of attorney only if they conform to the requirements of section 5-1503 of the New York GeneralObligations Law.)

This Durable Power of Attorney shall not be affected by my subsequent disability or incompetence.

If every agent named above is unable or unwilling to serve, I appoint

(insert name and address of successor)

N/A to be my agent for all purposes hereunder.

TO INDUCE ANY THIRD PARTY TO ACT HEREUNDER, I HEREBY AGREE THAT ANY THIRD PARTY RECEIVING A DULY EXECUTED COPY OR FACSIMILE OF THIS INSTRUMENT MAY ACT HEREUNDER, AND THAT REVOCATION OR TERMINATION HEREOF SHALL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNLESS AND UNTIL ACTUAL NOTICE OR KNOWLEDGE OF SUCH REVOCATION OR TERMINATION SHALL HAVE BEEN RECEIVED BY SUCH THIRD PARTY, AND I FOR MYSELF AND FOR MY HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

THIS DURABLE GENERAL POWER OF ATTORNEY MAY BE REVOKED BY ME AT ANY TIME.

IN WITNESS WHEROF, I have hereunto signed my name this day 30 of July, 2013.

(YOU SIGN HERE:) ==> /s/Brian Concannon Brian Concannon