FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number: 3235-028									
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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

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1. Name and Address of Reporting Person* SHALLISH ROBERT D JR						2. Issuer Name and Ticker or Trading Symbol CONMED CORP [CNMD]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
					3. Da	te of	Earlie	est Tran	saction (M	onth	/Dav/Year	r)			Direct			% Owner		
(Last)	(Firs	st) (N	/liddle)		06/0							,		X	below	r (give title		ner (specify ow)		
, ,	,												,	t/Finance/	•					
C/O CONMED CORP 525 FRENCH ROAD						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)													l'	X Form filed by One Reporting Person						
UTICA	NY	1:	3502-	-5994												Form filed by More than One Reporting Person				
(City)	(Sta	ite) (Z																		
		Table	e I - N	Non-Deriv	ative	Secu	uriti	es Ac	quired,	Dis	posed c	of, or Be	enefic	ially	Owne	d				
()			2. Transact Date (Month/Day		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (Disposed Of (D) (Instr. 3 and 5)			3, 4 Securi Benefi Owned		cially I	6. Ownership Form: Direct (D) or Indirect (I)	of Indirect Beneficial Ownership				
								Code	v	Amount	(A) o	Pric	ce			(Instr. 4)	(Instr. 4)			
Common	Stock	06/07/2	013				M		2,000	0 A	\$1	6.46	45	5,286	D					
Common	06/07/2	06/07/2013						1,374		\$3	2.38	43,912		D						
Common Stock				06/07/2	06/07/2013						2,800	0 A	\$1	9.26	46,712		D			
Common Stock 06/07					013			F		2,077 D \$		\$3	2.38	8 44,635		D				
Common Stock 06/07/2					013			M		2,800 A		\$2	6.09	09 47,435		D				
Common Stock 06/07/20								F		2,455			2.38 44,98		1,980	D				
		Та	ble I	l - Derivat (e.g., pı					uired, Di , option:						wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Execution Date, if any (Month/Day/Year) Derivative surity Execution Date, if any (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Date		ution Date,	Transa Code (action Number (Instr. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		6. Date Ex Expiration (Month/Da	Dat	e Amount of Securities Underlyin Derivative		t of dies I sying Sive (new York)		Price rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr.	D) Beneficial Ownershi rect (Instr. 4)			
				Date Exercisab		xpiration ate	Title	Amount or Number of e Shares												
Sars (Stock Appreciation Rights)	\$16.46	06/07/2013			М			2,000	(1)	0	6/01/2019	Common Stock	2,00	0	\$0	2,000	D			
Sars (Stock Appreciation Rights)	\$19.26	06/07/2013			М			2,800	(1)	0	6/01/2020	Common Stock	2,80	0	\$0	5,600	D			
Sars (Stock Appreciation					М			2,800				Common	2,80		\$0	11,200				

Explanation of Responses:

1. The stock appreciation rights ("SARs") were granted under the Company's 1999 Amended and Restated Long-Term Incentive Plan and generally vest in equal amounts over a five year period.

Heather L. Cohen for Robert D. Shallish by Power of

Attorney

** Signature of Reporting Person Date

06/10/2013

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.