FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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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* Murray David R					2. Issuer Name and Ticker or Trading Symbol CONMED CORP [CNMD]											Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) 504 PRO	(Fi	,	Middle)		3. Dat 05/17			st Tra	ansaction (Month/Day/Year)							belo	,	ECT	Other (specify below) TROSURGERY		
(Street) CASTLE	EROCK CO		80108 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Lir	ne) X Forr Forr	ividual 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,				Code (Instr. and 5)				sed Of (D			Secu Bene Owne	ficially ed	Forn (D) o	rect (I)	7. Nature of Indirect Beneficial Ownership	
								c	Code	v	Amou	nt (A) or (D)		Price	Repo Trans	Following Reported Transaction(s) (Instr. 3 and 4)		r. 4)	(Instr. 4)		
	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)	Execution Date, if any (Month/Day/Year)		4. Transactio Code (Insti 8)		on Number		Expi	6. Date Exercisable Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exer	e rcisable	Exp Date	iration e	Title	Amo or Num of Shar	ber						
Options to purchase Common Stock	\$31.4	05/17/2005			A		5,000		05/1	17/2006	05/1	17/2015	Commor Stock	5,0	00	\$0	25,000		D		

Explanation of Responses:

/s/ David R. Murray

** Signature of Reporting Person

05/19/2005

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).