## 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 <sup>*</sup> CORASANTIEUGENE R					<u>CO</u>	2. Issuer Name and Ticker or Trading Symbol CONMED CORP [ CNMD ]										onship of Repo all applicable) Director	rting	Person(s) to 10% C	
(Last)		(First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/06/2003									x	Officer (give til below)		Other (specify below) coard and CEO		
					4 If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6	6. Individual or Joint/Group Filing (Check Applicable				
(Street)														Line)					
LITICA NY 13502													Х	X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(City) (State) (Zip)														Person	lore t	han One Rep	oorting	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) Date (Month/Day					y/Year)	Execution Date,			Transaction D			. Securities Acquired ( Disposed Of (D) (Instr. nd 5)				5. Amount of Securities Beneficially Dwned Following	F (D	. Ownership orm: Direct D) or ndirect (I) nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount		A) or D)	Price	,   F	Reported Fransaction(s) Instr. 3 and 4)	nsaction(s)		(11501: 4)
Common Stock 11/06/20					2003	)03			S		12,50	0	D	\$20.6		279,662		D	
Common Stock																63,787	Τ	Ι	Spouse
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned         (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	if any	remed tion Date, n/Day/Year)		Transaction Code (Instr.		umber vative rities siired r osed ) r. 3, 4 5)	Expiratio (Month/D	n Dat ay/Ye	ear)	Amount of Securities Underlying Derivative Security (In 3 and 4)		str. ount nber	8. Pri of Deriv Secur (Instr	tive Securities ty Beneficia	s Ily J	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisat		Expiration Date	Title	of Sha	res					

Explanation of Responses:

/s/ Gene Corasanti

11/06/2003

\*\* Signature of Reporting Person Date

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.