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* 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) Director 10% Owner				
(Last)						3. Date of Earliest Transaction (Month/Day/Year) 03/31/2014								X	Offic belov	(0		(specify)
525 FRENCH ROAD					4. If Amendment, Date of Original Filed (Month/Day/Year)								′ I	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) UTICA (City)	NY (Sta		2-5994										X	Form	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. Transaction Date (Month/Day/Ye					ear) Ex	2A. Deemed Execution Date,			3. 4. Securities Transaction Code (Instr. 8) 5,					or 5. An		ficially d	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price	e R		wing rted action(s) . 3 and 4)	(Instr. 4)	(Instr. 4)
Common Stock 03/31/2014					14			Α	V	183	A	\$41.2	1.2775		5,290	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)	erivative Conversion Date Execution Date ecurity or Exercise (Month/Day/Year) if any		cution Date,		saction de (Instr. Derivative Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative rities ired osed	Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares		of Deri Secu (Inst	8. Price of derive Security (Instr. 5) General Follow Report Trans (Instr.		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

<u>Daniel S. Jonas for Robert D.</u> <u>Shallish by Power of Attorney</u>

04/02/2014

** Signature of Reporting Person 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).