SEC Form 4

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	3235-0287
Estimated average bur	den
hours per response:	0.5

	tion 1(b).			File					6(a) of the Se he Investment				934			Induis	perres	sponse.	0.5	
1. Name and Address of Reporting Person [*] DIFAZIO LOUIS DR						2. Issuer Name and Ticker or Trading Symbol BioScrip, Inc. [BIOS]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 100 CLEARBROOK ROAD						3. Date of Earliest Transaction (Month/Day/Year) 05/22/2007									Officer below)	give title		Other (s below)	pecify	
(Street) ELMSFORD NY 105			10523		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	itate)	(Zip)												Person					
			ble I - Nor	. <u> </u>					Acquired,	Dis	-	-		-			1			
1. Title of Security (Instr. 3)			2. Transac Date (Month/Da			2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.				ed (A) tr. 3, 4	or and	Securities Beneficia Owned Fe	5. Amount of Securities Beneficially Owned Following		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) or (D) P		ce Reporter Transact (Instr. 3		tion(s)			(Instr. 4)			
Common	Stock, \$.00	001 par value													2,5	2,500		D		
			Table II -	Deriva (e.g., p	tive uts	e Sec , cal	urities Is, wa	s Ao rran	cquired, Di its, option	ispo s, c	osed of, onvertib	or Ben le secu	eficia	ally C s)	Dwned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, Tr Co	ransaction code (Instr.		of		6. Date Exerc Expiration Da (Month/Day/)	ate	le and	7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	ve es ally Ig d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				C	ode	v	(A)	(D)	Date Exercisable		Expiration Date	Title	or	ount nber res						
Option to Purchase Common Stock	\$4.22	05/22/2007			A		5,000	5,000 05/22/2008 ⁽¹⁾ 05/22/2017 Common Stock, \$,0001 par value \$,000 \$,		5,00	0	D								
Option to Purchase Common Stock	\$4.69								(2)		05/27/2008	Common Stock, \$.0001 par value	20,	000		20,00)0	D		
Option to Purchase Common Stock	\$9.94								06/04/2003 ⁽¹⁾	(2)	06/04/2012	Common Stock, \$.0001 par value		000		5,00	0	D		
Option to Purchase Common Stock	\$6.58								06/05/2004 ⁽¹⁾	(2)	06/05/2013	Common Stock, \$.0001 par value		000		5,00	0	D		
Option to Purchase Common Stock	\$7.68								05/25/2005 ⁽	1)	05/25/2014	Common Stock, \$.0001 par value		000		5,00	0	D		
Option to Purchase Common Stock	\$5.29								05/25/2006 ⁽	1)	05/25/2015	Common Stock, \$.0001 par value		000		5,00	0	D		
Option to Purchase Common Stock	\$5.33								05/23/2007 ⁽	1)	05/23/2016	Common Stock, \$.0001 par value	5,0	000		5,00	0	D		

Explanation of Responses:

1. Vests and becomes exercisable in three equal annual installments commencing on the first anniversary of the date of grant.

2. Fully Vested

Remarks:

By: David Frankel, Power of

<u>Attorney</u>

05/23/2007

** 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.