

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL	
OMB Number:	3235-0287
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1. Name and Address of Reporting Person* <b>CORVESE RUSSEL J</b>  (Last) (First) (Middle) <b>C/O BIOSCRIP, INC.</b> <b>100 CLEARBROOK ROAD</b>  (Street) <b>ELMSFORD NY 10523</b>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <b>BioScrip, Inc. [ BIOS ]</b>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <b>Vice President Mail Operations</b>
	3. Date of Earliest Transaction (Month/Day/Year) <b>11/02/2007</b>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> 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/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock, \$.0001 par value	11/02/2007		F		8,376	D	\$8.15	46,553	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V		Date Exercisable	Expiration Date					
Employee Stock Option	\$6						02/28/2007 <sup>(1)</sup>	06/30/2015	Common Stock, \$.0001 par value	9,200	9,200	D	
Employee Stock Option	\$2.47						11/01/2007	11/01/2016	Common Stock, \$.0001 par value	104,858	104,858	D	
Employee Stock Option (Right to Buy)	\$6.5						(1)	07/06/2008	Common Stock, \$.0001 par value	22,000	22,000	D	
Employee Stock Option (Right to Buy)	\$4.5						(1)	06/01/2009	Common Stock, \$.0001 par value	20,000	20,000	D	
Employee Stock Option (Right to Buy)	\$12.2						11/28/2011 <sup>(2)</sup>	11/28/2001	Common Stock, \$.0001 par value	10,000	10,000	D	
Employee Stock Option (Right to Buy)	\$7.95						09/24/2004	09/24/2013	Common Stock, \$.0001 par value	35,000	35,000	D	

**Explanation of Responses:**

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

Russel J. Corvese 11/05/2007  
 \*\* 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.