FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

					U	ii Seci	1011 30(	(11) 01 1	lile ilive	Sument	Con	ipariy Ac	101134	U							
1. Name and Address of Reporting Person*  CORVESE RUSSEL J					2. Issuer Name <b>and</b> Ticker or Trading Symbol BioScrip, Inc. [ BIOS ]									(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) Vice President Mail Operations						
(Last) (First) (Middle) C/O BIOSCRIP, INC. 100 CLEARBROOK ROAD					3. Date of Earliest Transaction (Month/Day/Year) 11/01/2008																
TOU CLEARBROOK ROAD					_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable					
(Street) ELMSFORD NY 10523				_													filed by One Reporting Person filed by More than One Reporting n				
(City) (State) (Zip)																i cison					
		Tal	ble I - Nor	ı-Deriv	vativ	/e Se	curit	ies /	Acqui	ired, [	Disp	osed	of, or	Bene	ficiall	y Owned					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Ye		Execution Da		Code (Instr.						Securitie Beneficia Owned F	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
										Code	v	Amount		A) or D)	Price	Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)	
Common Stock, \$.0001 par value			11/0	1/20	80				F		8,37	<b>'</b> 6	D	\$3	60,677			D			
			Table II - I									sed of				Owned					
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,	4. Transa Code ( 8)		of Exp		Expira	Date Exercisable and piration Date on the piration Date on the piration Day/Year)		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	isable	Ex Da	piration te	Title	or Nu	ount mber Shares						
Employee Stock Option	\$6								02/28	/2007 <sup>(1)</sup>	06/	/30/2015	Comm Stock \$.000 par va	9	,200		9,200	0	D		
Employee Stock Option	\$2.47								11/0	1/2007	11/	/01/2016	Comm Stock \$.000 par va	10	4,858		104,85	58	D		
Employee Stock Option (Right to Buy)	\$4.5								,	(1)	06/	/01/2009	Comm Stock \$.000 par va	20	0,000		20,00	0	D		
Employee Stock Option (Right to Buy)	\$12.2								11/28	/2002 <sup>(2)</sup>	11/	/28/2011	Comm Stock \$.000 par va	1 10	),000		10,00	10	D		
Employee Stock Option (Right to Buy)	\$7.95								09/2	4/2004	09/	/24/2013	Comm Stock \$.000 par va	35	5,000		35,00	00	D		
Option to Purchase	\$6.52								04/2	9/2009	04/	/29/2018	Comm		5,250		56,25	0	D		

## **Explanation of Responses:**

1. Fully Vested

Stock

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

/s/ Russel J. Corvese

par value

11/04/2008

\*\* 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.