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BioScrip, Inc												
Form 4												
May 01, 2008									PPROVAL			
FORM	4 UNITED STA	ATES SECUR	ITIES A	ND EXO	CHAI	NGE (COMMISSION		THOUSE			
			hington,					Number:				
Check this if no long			0					Expires:	January 31,			
subject to	STATEMEN	T OF CHAN			CIA	LOW	NERSHIP OF	Estimated	2005 average			
Section 10			SECUR	ITIES				burden hou	irs per			
Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Excha						rohon	x_2 A at of 1024	response	0.5			
obligation	Section $17(a)$ o						of 1935 or Section	m				
may conti <i>See</i> Instru	nue.	30(h) of the In	•	•	· ·			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
1(b).	cuon			1.	•							
(Print or Type R	esponses)											
1 Name and A	ddress of Reporting Pers	on* 🤉 Laguar	Nome and	Tielsen on '	Tradin	~	5 Relationship o	f Reporting Per	son(s) to			
1. Name and Address of Reporting Person * SAMUELS STUART A2. Issuer Name and Ticker or Trading Symbol5. Relationship of Reporting Person(Issuer						301(3) 10						
BioScrip Inc [BIOS]												
(Last) (First) (Middle) 3. Date of Earliest Transaction						(Check all applicable)						
		Day/Year)				X Director 10% Owner						
100 CLEAR	BROOK ROAD	04/29/20	800				Officer (give below)	e title Oth below)	er (specify			
	(Street)	4 If Ame	ndment, Dat	te Original			6. Individual or J	<i>,</i>	ng(Check			
	(Bucci)		ith/Day/Year)	-			Applicable Line)	onn <i>u</i> Group I nn	ing(Cheek			
			• •				_X_ Form filed by					
ELMSFORE	D, NY 10523						Form filed by I Person	More than One R	eporting			
(City)	(State) (Zip)	Tabl	e I - Non-D	erivative S	Securi	ties A.c	quired, Disposed o	f or Beneficia	llv Owned			
1.Title of	2. Transaction Date 2.		3.	4. Securi		1105 710	5. Amount of	6. Ownership	-			
Security		xecution Date, if	Transactio			or	Securities	Form: Direct				
(Instr. 3)	ai	•	Code Disposed of (D)			· · · ·	(D) or	Beneficial				
	1)	Month/Day/Year)	(Instr. 8)	(Instr. 8) (Instr. 3, 4 and 5)			Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)			
					(A)		Reported	(,				
					or		Transaction(s) (Instr. 3 and 4)					
C			Code V	Amount	(D)	Price	(insu: 5 and 1)					
Common Stock,												
\$.0001 par	04/29/2008		А	8,500	А	\$0	8,500	D				
value												

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. D S (I
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Director Stock Option	\$ 6.14					<u>(1)</u>	11/13/2010	Common Stock, \$.0001 par value	33,600	
Director Stock Option	\$ 4.22					<u>(1)</u>	11/27/2011	Common Stock, \$.0001 par value	11,200	
Director Stock Option	\$ 4.43					<u>(1)</u>	11/20/2012	Common Stock, \$.0001 par value	11,200	
Director Stock Option	\$ 7.96					<u>(1)</u>	11/19/2013	Common Stock, \$.0001 par value	11,200	
Director Stock Option	\$ 6.61					03/12/2006 <u>(2)</u>	03/12/2015	Common Stock, \$.0001 par value	20,000	
Option to Purchase Common Stock	\$ 5.33					05/23/2007 <u>(2)</u>	05/23/2016	Common Stock, \$.0001 par value	5,000	

Reporting Owners

Reporting Owner Name / AddressRelationshipsDirector10% OwnerOfficerOtherSAMUELS STUART AXVVV100 CLEARBROOK ROADXVVVELMSFORD, NY 10523XVVV

Signatures

/s/ Stuart A. Samuels

05/01/2008

Signature of
Reporting Person

Date

Explanation of Responses:

* 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).

(1) Fully Vested

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.