FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB AP	PROVAL
OMB Number:	3235-0287
Estimated average	hurdon

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)

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

1. Name and Address of Reporting Person*

COLLADE CUDICELAN C

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

INTEGRA LIFESCIENCES HOLDINGS

2. Issuer Name and Ticker or Trading Symbol

UIVIB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

SCHADE CHRISTIAN S						CORP [IART]									Director Officer (give title			10% Ov	·	
	(Last) (First) (Middle) MEDAREX 707 STATE ROAD					3. Date of Earliest Transaction (Month/Day/Year) 06/12/2007									below)			Other (s below)		
(Street) PRINCETON NJ 08540							4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S		(Zip)																	
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transar Date (Month/Di				action	ar) i	curities Acq 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.					o) or 5. Am 4 and Secul Bene		nt of es ally Following	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	. [1	Transact (Instr. 3	tion(s)			(
Common Stock 06/1:					/2007			A		557	7 A)	1,2	1,223		D			
		T	able II - I (, or Ben ble secu			vned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	I. Fransaction Code (Instr. 3)				6. Date Ex Expiration (Month/Da	n Date	Amount of		of S Ig Security	Der Sec (Ins	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersi Form: Direct (E or Indire (I) (Instr.	Ownership	Beneficial Ownership (Instr. 4)	
				,	Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amount or Number of Shares	1						
Non- Qualified Stock Option (right to	\$49.33	06/12/2007			A		7,500		12/12/200	07 0	6/12/2013	Common Stock	7,500		\$0	7,500		D		

Explanation of Responses:

/s/ Carla Marcinko, Attorney-

06/14/2007 Date

in-Fact

** Signature of Reporting Person

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).