FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person* MOSZKOWSKI NEAL						2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [IART]								Relationship of Reporting Person(s) to Issuer neck all applicable) X Director 10% Owner				
	Last) (First) (Middle) 430 PARK AVENUE 6TH FLOOR				3. [3. Date of Earliest Transaction (Month/Day/Year) 08/09/2006								Offic belo	er (give title v)		Other (s below)	pecify
(Street) NEW YORK NY 10022					4. If Amendment, Date of Original Filed (Month/Day/Year) 08/10/2006								Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)						tive Securities Acquired, Disposed of, or Benefic								ly Own				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				saction	ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr		4. Securities Acquired (A Disposed Of (D) (Instr. 3,		ed (A) or	5. Ame Securi Benefi	unt of ties cially Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code		Amount	(A) or (D)	Price	Transa	ction(s) 3 and 4)			(
		7	Table II - [)						iired, Dis options					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. Transactio Code (Inst 8)				6. Date Exercisa Expiration Date (Month/Day/Yea			and 7. Title and Ar of Securities Underlying Derivative Sec (Instr. 3 and 4)		8. Price (Derivativ Security (Instr. 5)		e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisable		kpiration ate	Title	Amount or Number of Shares					
Non- Qualified Stock Option (right to buy)	\$35.76	08/09/2006			A		12,500		02/09/2007	08	8/09/2012	Common Stock	12,500	\$0	12,50	0	D	

Explanation of Responses:

/s/ Jeffrey Hellman, Attorney-

in-Fact

** Signature of Reporting Person

03/09/2007

Date

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).