

**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* <u>OGRADY JUDITH</u>  (Last) (First) (Middle) <u>311 C ENTERPRISE DRIVE</u>  (Street) <u>PLAINSBORO NJ 08536</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>INTEGRA LIFSCIENCES HOLDINGS CORP [ IART ]</u>	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) <u>Senior VP, Regulatory, Quality</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>11/01/2004</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year) <u>11/19/2004</u>		

**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			

**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	(A)	(D)	Date Exercisable	Expiration Date					
Incentive Stock Option (right to buy) <sup>(2)</sup>	\$32.02	11/01/2004		A		58		(1)	11/01/2010	Common Stock	\$0	58	D	
Incentive Stock Option (right to buy) <sup>(2)</sup>	\$32.02	11/01/2004		A		230		(1)	11/01/2010	Common Stock	\$0	288	D	
Incentive Stock Option (right to buy) <sup>(2)</sup>	\$32.02	11/01/2004		A		230		(1)	11/01/2010	Common Stock	\$0	518	D	
Non-Qualified Stock Option (right to buy) <sup>(2)</sup>	\$32.02	11/01/2004		A		192		(1)	11/01/2010	Common Stock	\$0	192	D	
Non-Qualified Stock Option (right to buy) <sup>(2)</sup>	\$32.02	11/01/2004		A		770		(1)	11/01/2010	Common Stock	\$0	962	D	
Non-Qualified Stock Option (right to buy) <sup>(2)</sup>	\$32.02	11/01/2004		A		770		(1)	11/01/2010	Common Stock	\$0	1,732	D	

**Explanation of Responses:**

- 25% of the combined Incentive Stock Options and Non-Qualified Stock Options set forth in Table II vest one year after the grant date, with the remaining 75% vesting monthly thereafter over 36 months.
- Note: On the Form 4 originally filed, the option grants set forth in Table II above were aggregated on one line in Table II and inadvertently included in Table I as well. This amendment is being filed to remove the securities from Table I and to separate the different grants in Table II.

/s/ Judith O'Grady

02/09/2005

\*\* 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.**