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

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

1. Name and Address of Reporting Person*  SULLIVAN JAMES M  (Last) (First) (Middle)  311 ENTERPRISE DR					Issuer Name and Ticker or Trading Symbol     INTEGRA LIFESCIENCES HOLDINGS     CORP [ IART ]      Date of Earliest Transaction (Month/Day/Year)     05/19/2004							Relationship of Reporting Person(s) to Issuer eck all applicable)  X Director 10% Owner Officer (give title below) Other (specify below)				ner
(Street) PLAINSBORO NJ 08536  (City) (State) (Zip)				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					tion 2A. Deemed Execution Date,		3. Transaction	4. Secur	S. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form (D) o	: Direct r Indirect str. 4)	7. Nature Of Indirect Beneficial Ownership (Instr. 4)	
1. Title of Derivative Security (Instr. 3)	(e.g.  Title of 2. 3. Transaction Date Execution Date, or Exercise (Month/Day/Year)			g., puts,	4. Transaction Code (Instr.			uired, Disposed of 6, options, converti 6. Date Exercisable and Expiration Date (Month/Day/Year)		DIE SECURITIES)  7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount		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	Title	or Number of Shares					
Non- Qualified Stock Option (right to buy)	\$30.18	05/19/2004		A		12,500		08/17/2004	05/17/2010	Common Stock	12,500	\$0.00	12,50	0	D	

**Explanation of Responses:** 

/s/ Christie A. Davis-Cumming 05/26/2004 (attorney in fact)

\*\* Signature of Reporting Person

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).