## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washin

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

gton, D.C. 20549	OMB APPRO

VAL OMB Number: 3235-0287 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*  MOSZKOWSKI NEAL  (Last) (First) (Middle)  430 PARK AVENUE  6TH FLOOR  (Street)  NEW YORK NY 10022  (City) (State) (Zip)					2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [ IART ]  3. Date of Earliest Transaction (Month/Day/Year) 08/19/2008  4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Lit	S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner Officer (give title Other (specify below)      6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
1. Title of Security (Instr. 3)  2. Tran Date (Month)  Table II - Deriva				Transaction to the control of the co	2A. Deemed Execution Date if any (Month/Day/Yea		3. Transac Code (Ir ar) Code	etion nstr. V	sed of, or Benefic		ed (A) or tr. 3, 4 ar Price	5. Amou Securiti Benefic Owned Reporte Transac (Instr. 3	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Direct of Indirect str. 4)	7. Nature of Indirect Beneficial Ownership Instr. 4)	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	4. Pate, Transacti Code (Ins		5. Number of		6. Date Exercise Expiration Date (Month/Day/Yea		le and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	Ownersh Form: y Direct (D) or Indirect (I) (Instr.	Ownership	Beneficial Ownership ct (Instr. 4)
				Code	e V	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares	1				
Non- Qualified Stock Option (right to buy)	\$48.68	08/19/2008		A		7,500		08/19/2009	08/	19/2016	Common Stock	7,500	\$0.00	7,500		D	
Non- Qualified Stock Option (right to buy)	\$48.68	08/19/2008		A		4,930		08/19/2009	08/	19/2016	Common Stock	4,930	\$0.00	4,930		D	

**Explanation of Responses:** 

Kathryn Lamping Attorney-in-

**fact** 

\*\* Signature of Reporting Person

08/21/2008 Date

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

- $^{\star}$  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).

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.