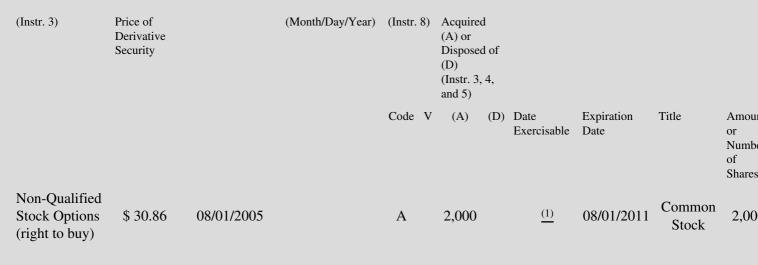
Edgar Filing: INTEGRA LIFESCIENCES HOLDINGS CORP - Form 4

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INTEGRA LIF		HOLDIN	GS COF	RP					
August 02, 200: FORM Check this be if no longer subject to Section 16. Form 4 or Form 5 obligations may continue <i>See</i> Instruction 1(b).	4 UNITED DX STATEM Filed pur Section 17(MENT OF rsuant to S (a) of the I	Wa F CHAN Section 1 Public U	shington NGES IN SECUF (6(a) of th (tility Hol	, D.C. 20 BENEF RITIES ne Securit ding Cor	5 49 ICIAL OV ties Exchan	COMMISSION WNERSHIP OF nge Act of 1934, of 1935 or Section 940	N OMB Number: Expires: Estimated burden hou response	urs per
(Print or Type Resp	oonses)								
			2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [IART]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last) 311 C ENTER		Middle) E		of Earliest T Day/Year) 2005	ransaction		Director X Officer (giv below) Vice P		% Owner her (specify ions
				endment, Da nth/Day/Yea	-	1	 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 		
PLAINSBORG), NJ 08536						Form filed by Person	More than One R	eporting
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned
	Transaction Date onth/Day/Year)		ed Date, if	3. Transactio	4. Securit nAcquired Disposed (Instr. 3, 4	ies (A) or of (D)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect
Reminder: Report	on a separate line	e for each cla	ass of sect	urities benet	Perso	ns who res	or indirectly. spond to the colle ained in this form		SEC 1474 (9-02)

required to respond unless the form displays a currently valid OMB control number. Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securitie
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)



Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
NOCIOLO DON R 311 C ENTERPRISE DRIVE PLAINSBORO, NJ 08536			Vice President, Operations				
Signatures							
/s/ Jeffrey Hellman, Attorney-in-Fact		08/02/200	5				
<u>**</u> Signature of Reporting Person		Date					
Explanation of Responses:							

* 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).

(1) The option vests in four equal annual installments beginning on August 1, 2006.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.