FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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* <u>CARFORA ALFRED</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol BioScrip, Inc. [ BIOS ]										eck all a Dir	pplic ecto	able)	g Pers	Person(s) to Issuer  10% Owner  Other (specify			
(Last) (First) (Middle) 100 CLEARBROOK ROAD					3. Date of Earliest Transaction (Month/Day/Year) 11/21/2005												below) EVP, East			below)			
(Street) ELMSF(		Y State)	10523 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Ye								ay/Yea	ar)		6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person							
Date				2. Transa	ction	ar)	2A. Deemed Execution Date if any (Month/Day/Ye		3. Transaction Code (Instr		ion	4. Securi		cquire	d (A) or	r 5. Amou Securiti Benefic Owned		es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
									G	Code	/	Amount		(A) or (D)	Price	Trai	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock, \$.0001 par value 11/					1/2005					S		8,835	5	D	\$7.98	09	0		D				
			Table II - D									osed of onverti				Owne	ed						
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	Co	4. Transaction Code (Instr. 8)				6. Date Exerci Expiration Dat (Month/Day/Ye		ite		7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		es Security	8. Pric Deriva Securi (Instr.	tive ty	9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
				Co	ode	v	(A)	(D)	Date Exerc	isable		xpiration ate	Title		Amount or Number of Shares								
Employee Stock Option	\$6								02/28/	/2007 <sup>(1)</sup>	06	5/30/2015	Com Sto \$.00 par v	ck, 001	103,500			103,50	00	D			
Employee Stock Option (Right to Buy)	\$6.11								03/12/	/2004 <sup>(2)</sup>	03	3/12/2013	Com Sto \$.00 par v	ck, 001	150,000			150,00	00	D			
Employee Stock Option (Right to	\$7.95								09/24	4/2004	09	9/24/2013	Com Sto \$.00 par v	ck, 001	200,000			200,00	00	D			

## **Explanation of Responses:**

- 1. Fully Vested
- 2. Vests and becomes exercisable in three equal annual installments commencing on the first anniversary of the date of grant.

## Remarks:

<u>/s/ Carfora, Alfred</u> <u>11/23/2005</u>

\*\* Signature of Reporting Person 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.