FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEM	1ENT	OF	CHANG	3

ES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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

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1. Name and Address of Reporting Person* CORVESE RUSSEL J					2. Issuer Name and Ticker or Trading Symbol BioScrip, Inc. [BIOS]								(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable) Director						
	SCRIP, IN	C.	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/26/2009						X	X Officer (give title below) Other (specification) Vice President Mail Operations							
100 CLE	EARBROOI	K ROAD			4	If Ame	endmer	nt Dat	e of Origin	al File	ed i	(Month/D	av/Year)		6 Inc	lividual or .l	oint/Group	Filing	(Check An	olicable
(Street)	Street) ELMSFORD NY 10523		_	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(S	tate)	(Zip)													Person				
		Tal	ble I - No	n-Der	ivativ	re Se	curit	ies A	Acquire	d, Di	isp	osed	of, or B	enefi	cially	Owned				
Date		Date	nsaction	ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Dispos			rities Acquired (A) ed Of (D) (Instr. 3, 4			Beneficia Owned F	ties	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v		Amount	(A) (D)	Pr Pr	ice	Reported Transact (Instr. 3	ion(s)			(Instr. 4)
Common	Common Stock, \$.0001 Par Value			08/26/2009		9			S			17,83	39 D \$6		6.131′	42,838		D		
			Table II -						quired, its, opti							Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d Date,	4. Transa Code (8)	action	5. Nu of Deriv	rative rities rired r osed)	6. Date Expiration (Month/D	xercis n Date	ar) 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		id Amo ties ig e Secu	ount	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	re es ally g d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal	ole	Ex Da	piration ite	Title	Amo or Num of Si						
Option To Purchase Common Stock	\$2.73								04/28/201	0(1)	04	/28/2019	Common Stock, \$.0001 Par Value	75,	000		75,00	0	D	
Employee Stock Option (Right to Buy)	\$12.2								11/28/200	12(2)	11	/28/2011	Common Stock, \$.0001 Par Value	10,	000		10,00	0	D	
Employee Stock Option (Right to Buy)	\$7.95								09/24/200)4 ⁽²⁾	09	/24/2013	Common Stock, \$.0001 Par Value	35,	000		35,00	0	D	
Employee Stock Option (Right to Buy)	\$6								02/28/200)7 ⁽²⁾	06	/30/2015	Common Stock, \$.0001 Par Value	9,2	200		9,200)	D	
Employee Stock Option (Right to Buy)	\$2.47								11/01/200)7 ⁽¹⁾	11	/01/2016	Common Stock, \$.0001 Par Value	104	,858		104,85	58	D	
Option To Purchase Common Stock	\$6.52								04/29/200	99(1)	04	/29/2018	Common Stock, \$.0001 Par Value	56,	250		56,25	0	D	

Explanation of Responses:

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

/s/ Russel J. Corvese

08/27/2009

** 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.