FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| ngton, D.C. 20549 | OMB APPROVAL |
|-------------------|--------------|
| | |
| | |

| OMB Number: | 3235-0287 |
|-----------------------|-----------|
| Estimated average bur | den |
| 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* SAMUELS STUART A | | | | | | 2. Issuer Name and Ticker or Trading Symbol BioScrip, Inc. [BIOS] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|--|--|---------------|--|--------|--------------|--|---|---------------------------|--|--------|---|--|--|--|---|--|----------------|--|---|--|
| (Last) (First) (Middle) 100 CLEARBROOK ROAD | | | | | | | of Earlie | est Tra | nsaction (Mo | onth/I | Day/Year) | 1 | Officer (give title below) Other (spec | | | | | | | |
| (Street) ELMSFORD NY 10523 | | | | | 4. 1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | action | ction 2A. De | | | 3. Transa Code (| 3. 4. Securit Transaction Disposed Code (Instr. 5) | | of, or Benefic ities Acquired (A) d Of (D) (Instr. 3, 4 | | (A) or | 5. Amou Securitie Beneficie Owned F | nt of es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | nt (A) or (D) | | Price | Reported Transact (Instr. 3 | ion(s) | | | (Instr. 4) | |
| Common | Stock, \$.00 | 001 par value | | 05/07 | 7/200 | 8 | | | P | | 3,00 | 0 | A | \$4.0 | 7 11, | 500 | | D | | |
| | | - | | | | | | | quired, D ts, option | | | | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | L. Title of 2. S. Transaction Derivative Conversion Date Execution Date, Ground Date Execution Date, Ground Date If any Code (Instr. | | | | | | of Deriv Secu Acqu (A) o Disp of (D | r osed) r. 3, 4 | 6. Date Exe Expiration I (Month/Day | Date | | 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4) | | ecurity 4) | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | Expiration Date | Title | O N O | umber | | | | | | |
| Director Stock Option | \$6.14 | | | | | | | | (1) | 1 | .1/13/2010 | | 001 | 3,600 | | 33,600 | 0 | D | | |
| Director Stock Option | \$4.22 | | | | | | | | (1) | 1 | 1/27/2011 | | 001 | 1,200 | | 11,200 | 0 | D | | |
| Director Stock Option | \$4.43 | | | | | | | | (1) | 1 | 1/20/2012 | Sto \$.0 | nmon ock, 001 value | 1,200 | | 11,200 | 0 | D | | |
| Director Stock Option | \$7.96 | | | | | | | | (1) | 1 | 1/19/2013 | \$.0 | nmon ock, 001 value | 1,200 | | 11,200 | 0 | D | | |
| Director Stock Option | \$6.61 | | | | | | | | 03/12/2006 ⁰ | (2) | 3/12/2015 | Sto \$.0 | nmon ock, 001 value | 0,000 | | 20,000 | 0 | D | | |
| Option to Purchase Common | \$5.33 | | | | | | | | 05/23/2007 ⁰ | (2) | 05/23/2016 | | nmon ock, 001 | 5,000 | | 5,000 | | 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.

/s/ David Frankel, Power of Attorney

05/08/2008

** 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.