

EMAGEON INC  
Form 4  
October 17, 2008

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

Check this box  
if no longer  
subject to  
Section 16.  
Form 4 or  
Form 5  
obligations  
may continue.  
See Instruction  
1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF  
SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

## OMB APPROVAL

OMB  
Number: 3235-0287  
Expires: January 31,  
2005  
Estimated average  
burden hours per  
response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
**ACCIPITER CAPITAL  
MANAGEMENT, LLC**

(Last) (First) (Middle)

**666 5TH AVENUE, 35TH FLOOR**

(Street)

**NEW YORK, NY 10103**

(City) (State) (Zip)

2. Issuer Name **and** Ticker or Trading  
Symbol  
**EMAGEON INC [EMAG]**

3. Date of Earliest Transaction  
(Month/Day/Year)  
**10/15/2008**

4. If Amendment, Date Original  
Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to  
Issuer

(Check all applicable)

\_\_\_\_ Director \_\_\_\_X\_\_\_\_ 10% Owner  
\_\_\_\_ Officer (give title below) \_\_\_\_ Other (specify below)

6. Individual or Joint/Group Filing(Check  
Applicable Line)  
\_\_\_\_ Form filed by One Reporting Person  
\_\_\_\_X\_\_\_\_ Form filed by More than One Reporting  
Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock, \$0.001 Par Value	10/15/2008		P	17,233 A \$ 2.4629	529,394	I	By ALSF II (Offshore), Ltd. <sup>(1)</sup>
Common Stock, \$0.001 Par Value	10/16/2008		P	68,671 A \$ 2.4831	598,065	I	By ALSF II (Offshore), Ltd. <sup>(1)</sup>
Common Stock, \$0.001 Par Value	10/17/2008		P	47,396 A \$ 2.5052	645,461	I	By ALSF II (Offshore), Ltd. <sup>(1)</sup>

Edgar Filing: EMAGEON INC - Form 4

Common Stock, \$0.001 Par Value	10/15/2008	P	9,734	A	\$ 2.4629	305,267	I	By ALSF II (QP), LP <sup>(2)</sup>
Common Stock, \$0.001 Par Value	10/16/2008	P	41,278	A	\$ 2.4831	346,545	I	By ALSF II (QP), LP <sup>(2)</sup>
Common Stock, \$0.001 Par Value	10/17/2008	P	34,397	A	\$ 2.5052	380,942	I	By ALSF II (QP), LP <sup>(2)</sup>
Common Stock, \$0.001 Par Value	10/15/2008	P	6,938	A	\$ 2.4629	265,312	I	By ALSF II, LP <sup>(3)</sup>
Common Stock, \$0.001 Par Value	10/16/2008	P	23,751	A	\$ 2.4831	289,063	I	By ALSF II, LP <sup>(3)</sup>
Common Stock, \$0.001 Par Value						749,206	I	By ALSF (Offshore), Ltd. <sup>(4)</sup>
Common Stock, \$0.001 Par Value						747,430	I	By ALSF, LP <sup>(5)</sup>

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

**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 control number.**

SEC 1474  
(9-02)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned**  
(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 6)
---	--	---	---	--------------------------------------	--	--	---	---	---

Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
------	---	-----	-----	---------------------	--------------------	-------	--

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
ACCIPITER CAPITAL MANAGEMENT, LLC 666 5TH AVENUE 35TH FLOOR NEW YORK, NY 10103		X		
ACCIPITER LIFE SCIENCES FUND II L P 666 5TH AVENUE 35TH FLOOR NEW YORK, NY 10103		X		
Accipiter Life Sciences Fund II Offshore Ltd 666 5TH AVENUE 35TH FLOOR NEW YORK, NY 10103		X		
ACCIPITER LIFE SCIENCES FUND II QP L P 666 5TH AVENUE 35TH FLOOR NEW YORK, NY 10103		X		
ACCIPITER LIFE SCIENCES FUND LP 666 5TH AVENUE 35TH FLOOR NEW YORK, NY 10103		X		
ACCIPITER LIFE SCIENCES FUND OFFSHORE LTD 666 5TH AVENUE 35TH FLOOR NEW YORK, NY 10103		X		
Candens Capital LLC 666 5TH AVENUE 35TH FLOOR NEW YORK, NY 10103		X		
HOFFMAN GABE 666 5TH AVENUE 35TH FLOOR NEW YORK, NY 10103		X		

## Signatures

By: Accipiter Capital Management, LLC; By: /s/ Gabe Hoffman, Managing Member	10/17/2008
__Signature of Reporting Person	Date
By: Candens Capital, LLC, its General Partner; By: s/ Gabe Hoffman, Managing Member	10/17/2008
__Signature of Reporting Person	Date
By: Accipiter Capital Management, LLC, its Investment Manager; By: /s/ Gabe Hoffman, Managing Member	10/17/2008
__Signature of Reporting Person	Date
By: Candens Capital, LLC, its General Partner; By: s/ Gabe Hoffman, Managing Member	10/17/2008
__Signature of Reporting Person	Date
By: Candens Capital, LLC, its General Partner; By: s/ Gabe Hoffman, Managing Member	10/17/2008
__Signature of Reporting Person	Date
By: Accipiter Capital Management, LLC, its Investment Manager; By: /s/ Gabe Hoffman, Managing Member	10/17/2008
__Signature of Reporting Person	Date
By: /s/ Gabe Hoffman, Managing Member	10/17/2008
__Signature of Reporting Person	Date
/s/ Hoffman, Gabe	10/17/2008
__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).

Held by Accipiter Life Sciences Fund II (Offshore), Ltd. Accipiter Capital Management, LLC, the investment manager of Accipiter Life Sciences Fund II (Offshore), Ltd. and Gabe Hoffman, the managing member of Accipiter Capital Management, LLC, disclaim beneficial ownership of these securities except to the extent of their pecuniary interest therein.

Held by Accipiter Life Sciences Fund II (QP), LP. Candens Capital, LLC, the general partner of Accipiter Life Sciences Fund II (QP), LP, and Gabe Hoffman, the managing member of Candens Capital, LLC, disclaim beneficial ownership of these securities except to the extent of their pecuniary interest therein.

Held by Accipiter Life Sciences Fund II, LP. Candens Capital, LLC, the general partner of Accipiter Life Sciences Fund II, LP and Gabe Hoffman, the managing member of Candens Capital, LLC, disclaim beneficial ownership of these securities except to the extent of their pecuniary interest therein.

Held by Accipiter Life Sciences Fund (Offshore), Ltd. Accipiter Capital Management, LLC, the investment manager of Accipiter Life Sciences Fund (Offshore), Ltd. and Gabe Hoffman, the managing member of Accipiter Capital Management, LLC, disclaim beneficial ownership of these securities except to the extent of their pecuniary interest therein.

Held by Accipiter Life Sciences Fund, LP. Candens Capital, LLC, the general partner of Accipiter Life Sciences Fund, LP and Gabe Hoffman, the managing member of Candens Capital, LLC, disclaim beneficial ownership of these securities except to the extent of their pecuniary interest therein.

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.