

ALLSCRIPTS-MISYS HEALTHCARE SOLUTIONS, INC.
 Form 4
 May 21, 2009

FORM 4

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

OMB APPROVAL

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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

(Print or Type Responses)

1. Name and Address of Reporting Person *
GAMACHE M L

(Last) (First) (Middle)

5 WHITEHALL PLACE

(Street)

FARMINGTON, CT 06032

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol

**ALLSCRIPTS-MISYS
 HEALTHCARE SOLUTIONS, INC.
 [MDRX]**

3. Date of Earliest Transaction
 (Month/Day/Year)

05/19/2009

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

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

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

6. Individual or Joint/Group Filing(Check Applicable Line)

Form filed by One Reporting Person
 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)
			Code	V	Amount or Price		
Common Stock	05/19/2009		M ⁽¹⁾		18,185 A \$ 1.33 37,576	D	
Common Stock	05/19/2009		S ⁽¹⁾		18,185 D 13.06 19,391	D	
Common Stock	05/20/2009		M ⁽¹⁾		1,815 A \$ 1.33 21,206	D	
Common Stock	05/20/2009		S ⁽¹⁾		1,815 D \$ 13 19,391	D	

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

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(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)	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 1.33	05/19/2009		M ⁽¹⁾	18,185	08/01/2007 08/01/2013	Common Stock	18,185
Stock Option (Right to Buy)	\$ 1.33	05/20/2009		M ⁽¹⁾	1,815	08/01/2007 08/01/2013	Common Stock	1,815

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
GAMACHE M L 5 WHITEHALL PLACE FARMINGTON, CT 06032	X			

Signatures

Brian Vandenberg for Marcel Gamache 05/21/2009

__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).

These exercises and sales were effected pursuant to a 10b5-1 plan adopted by the reporting person in April 2009. The number of shares

(1) subject to the option and the exercise price were adjusted as a result of the special cash dividend of \$5.23 per share that the Issuer declared in connection with the transactions with Misys plc and Misys Healthcare Systems LLC completed on October 10, 2008.

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- These transactions were executed in multiple trades at prices ranging from \$13.0 to \$13.12. The prices reported reflect the weighted
- (2) average sale price on the transaction date. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

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.