VASOMEDICAL INC

Form 4

October 31, 2005

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

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if no longer subject to Section 16. Form 4 or Form 5 obligations

Check this box

may continue. See Instruction

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(b).

1. Name and Address of Reporting Person * SHAPIRO E DONALD

2. Issuer Name and Ticker or Trading Symbol

VASOMEDICAL INC [VASO]

5. Relationship of Reporting Person(s) to

Issuer

below)

(Last)

(First)

(Street)

(State)

(Middle)

3. Date of Earliest Transaction

(Month/Day/Year)

X_ Director Officer (give title

10% Owner Other (specify

C/O VASOMEDICAL, INC. 180 LINDEN AVE.

(City)

4. If Amendment, Date Original

Filed(Month/Day/Year)

10/27/2005

6. Individual or Joint/Group Filing(Check

(Check all applicable)

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

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

WESTBURY, NY 11590

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) any

3. 4. Securities Acquired Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially (D) or Owned Following (Instr. 4)

6. Ownership 7. Nature of Form: Direct Indirect Beneficial Indirect (I) Ownership (Instr. 4)

(Month/Day/Year)

(Zip)

Reported (A) Transaction(s) or (Instr. 3 and 4) Price

Common Stock

10/27/2005

Code V Amount (D) Α 25,000

(1) 617,428

D

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)

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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. Transactio Code (Instr. 8)	5. Number of or Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day.	ate	7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
1999 Stock Option Plan	\$ 0.95	10/28/2004		A	25,000	(2)	10/27/2014	Common Stock	25,000
1999 Stock Option Plan, as amended	\$ 1.31	02/20/2004		A	25,000	(3)	10/29/2013	Common Stock	25,000
1999 Stock Option Plan	\$ 1	12/18/2002		A	15,000	(3)	12/17/2012	Common Stock	15,000
1999 Stock Option Plan	\$ 3.13	10/10/2001		A	15,000	(3)	10/09/2011	Common Stock	15,000
1999 Stock Option Plan	\$ 3.875	10/11/2000		A	15,000	(3)	10/10/2010	Common Stock	15,000

Reporting Owners

Reporting Owner Name / Address	Relationships				
. 6	Director	10% Owner	Officer	Other	
SHAPIRO E DONALD C/O VASOMEDICAL, INC. 180 LINDEN AVE. WESTBURY, NY 11590	X				

Signatures

/s/ E. Donald Shapiro	10/31/2005
**Signature of Reporting Person	Date

Reporting Owners 2

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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).
- (1) Directors' annual fee.
- (2) Options vest in four equal annual installments.
- (3) Options vest in three equal annual installments.

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.