

BioScrip, Inc.  
Form 3  
May 01, 2008

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2005  
Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF 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 *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Friedman Scott		(Month/Day/Year)	BioScrip, Inc. [BIOS]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
100 CLEARBROOK ROAD			(Check all applicable)	
(Street)			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below)    (specify below)	
ELMSFORD,Â NYÂ 10523			Executive Vice President	
(City)	(State)	(Zip)	6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock, \$.0001 par value	63,636	D	Â

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

SEC 1473 (7-02)

**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.**

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

Edgar Filing: BioScrip, Inc. - Form 3

				Shares		(I) (Instr. 5)	
Option to Purchase Common Stock	11/28/2002 <sup>(1)</sup>	11/28/2011	Common Stock, \$.0001 par value	14,000	\$ 12.2	D	Â
Option to Purchase Common Stock	09/24/2004 <sup>(1)</sup>	09/24/2013	Common Stock, \$.0001 par value	20,000	\$ 7.95	D	Â
Option to Purchase Common Stock	07/01/2006 <sup>(2)</sup>	07/01/2015	Common Stock, \$.0001 par value	11,500	\$ 6	D	Â
Option to Purchase Common Stock	11/01/2007 <sup>(2)</sup>	11/01/2016	Common Stock, \$.0001 par value	74,008	\$ 2.47	D	Â
Option to Purchase Common Stock	02/28/2009 <sup>(2)</sup>	02/28/2018	Common Stock, \$.0001 par value	10,000	\$ 7.16	D	Â
Option to Purchase Common Stock	04/29/2009 <sup>(2)</sup>	04/29/2018	Common Stock, \$.0001 par value	56,250	\$ 6.52	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Friedman Scott 100 CLEARBROOK ROAD ELMSFORD, NY 10523	Â	Â	Â Executive Vice President	Â

## Signatures

/s/ Scott  
Friedman

05/01/2008

\*\*Signature of  
Reporting Person

Date

## Explanation of Responses:

\* If the form is filed by more than one reporting person, see Instruction 5(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) Fully Vested

## Edgar Filing: BioScrip, Inc. - Form 3

(2) Vests and becomes exercisable in three equal annual installments commencing on the first anniversary of the date of grant.

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.