

MERGE HEALTHCARE INC
Form 4
August 20, 2008

FORM 4

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

OMB APPROVAL

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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

(Print or Type Responses)

1. Name and Address of Reporting Person *
RECK RICHARD A

2. Issuer Name and Ticker or Trading Symbol
**MERGE HEALTHCARE INC
[MRGE]**

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
**6737 WEST WASHINGTON
STREET, SUITE 2250**

(Street)

3. Date of Earliest Transaction
(Month/Day/Year)
08/19/2008

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

MILWAUKEE, WI 53214

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

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

(City) (State) (Zip)

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 Ownership (Instr. 4)
				(A) or (D) Code V Amount (D) Price			
Common Stock					18,028	D	
Common Stock					221,610	I	Trust ⁽¹⁾
Common Stock					10,000	I	Trust ⁽²⁾

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

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(9-02)

displays a currently valid OMB control number.

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 Security (Instr. 3 and 4)				
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount
											Number of Shares
Stock Options	\$ 1.47	08/19/2008		A	225,000	08/19/2008 ⁽³⁾	08/18/2018			Common Stock	225,000

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
RECK RICHARD A 6737 WEST WASHINGTON STREET SUITE 2250 MILWAUKEE, WI 53214	X			

Signatures

/s/ Julie Ann B. Schumitsch, by Power of Attorney for Richard A. Reck
Date: 08/20/2008

__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).
- (1) Shares of Common Stock held by the Susan M. Reck Trust, for the benefit of Susan M. and Richard A. Reck, of which Ms. Reck is the trustee, the beneficial ownership of which Mr. Reck disclaims.
- (2) Shares of Common Stock held by the Alan C. Reck Trust, for the benefit of Mr. Reck's adult son, of which the grandparents of Mr. Reck's adult son are the grantors and Mr. Reck is the trustee; the beneficial ownership of which Mr. Reck disclaims.
- (3) Nonqualified stock options to purchase shares of Common Stock vesting in sixteen (16) equal quarterly increments of 14,062.5, with the first increment vesting on August 19, 2008 and then subsequent increments vesting on November 30, February 28, May 31 and August 31 thereafter.

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.