FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name a	ALL	2. Issuer Name and Ticker or Trading Symbol ALLSCRIPTS HEALTHCARE SOLUTIONS INC [MDRX]										(Chec	k all app Direc	plicable)		Person(s) to Issuer 10% Owner Other (specify						
(Last) 222 ME	,	rst) (SE MART PLAZ	Middle)	TE 2024		3. Date of Earliest Transaction (Month/Day/Year) 06/03/2008										X	belov	below) President, Medi		below)		
(Street) CHICAC			50654 Zip)		- 4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Ind Line) X	Form	al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)						ion 2A. Deemed Execution Date,			3. 4. S Transaction Code (Instr. and			4. Secu	Securities Acquired (5. Am Secur Benef Owned	ount of ities icially	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership	
									Code	v		Amour	nt	(A) o (D)	r Pri	ice			(Inst	r. 4)	(Instr. 4)	
Common	2008	800			M			3,00	00	A		\$ <mark>2</mark>	12,199			D						
Common	2008				S			3,00	00	D \$		12.5	٥	9,199		D						
	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. Transact Code (In 8)		on Number		6. Date Exercisabl Expiration Date (Month/Day/Year)			e and 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ı	8. Price of Derivativ Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisab		Expii Date	ration	Title	Ar or Nu of Title								
Stock Option (right to buy)	\$2	06/03/2008			M			3,000	(1)		08/05	5/2012	Comn		3,000		\$0	8,000		D		

Explanation of Responses:

1. Stock option granted on August 5, 2002 ("Grant Date") under the Allscripts Healthcare Solutions, Inc. 1993 Stock Incentive Plan. The stock option vested in three equal annual installments.

Jena Kluska Metropulos for John G. Cull by Power of

06/05/2008

Attorney

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.