FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
OMB Number:	3235-0287							
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Estimated average burden								
hours per response	0.5							

1. Name and Address of Reporting Person* SHAPIRO LEE			2. Issuer Name and Ticker or Trading Symbol ALLSCRIPTS HEALTHCARE SOLUTIONS INC [MDRX]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
SOLUTIONS	ALL SCRIPTS HEALTCHARE		3. Date of Earliest Transaction (Month/Day/Year) 01/17/2006	×	Officer (give title below) Preside	10% Owner Other (specify below)	
(Street) CHICAGO (City)	IL (State)	60654 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	(Che X Fo	dividual or Joint/Gr ck Applicable Line) orm filed by One Re orm filed by More the eporting Person	eporting 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. Transac Code (Instr. 8)		4. Secur Acquired Dispose (Instr. 3,	l (A) d of	or (D)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
			Code	V	Amount	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)	or Indirect (I) (Instr. 4)	(Instr. 4)		
Common Stock (1)	01/17/2006		Α		21,818	Α	\$ 0	37,187	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. Transac Code (Instr. 8)	ransaction Number of Derivative				7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Award of Restricted Stock under the Allscripts Healthcare Solutions, Inc. 1993 Stock Incentive Plan. The Award became effective on January 17, 2006 and will be distributed under two issuances. Half of the award was issued on January 17, 2006, and the other half of the award will be issued on July 17, 2006. The award vests 25% on each of the first four anniversaries of the respective issuance dates. The Award Agreement provides for accelerated vesting of the award in the event of a change of control.

Gina Nienberg, Power of Attorney

01/19/2006

** Signature of Reporting

Date

Person

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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.