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).

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1. Name ar		2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [ HSTM ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
IVICLA	IXEIN JEI	TIKETE									_			X	Directo	or		10% Ow	/ner
(Last) 209 10T	Last) (First) (Middle) 209 10TH AVENUE SOUTH, SUITE 450					3. Date of Earliest Transaction (Month/Day/Year) 05/28/2009										Officer (give title below)		Other (s below)	pecify
-			4. 11	f Ame	endment,	Date	of Original	Filed	(Month/D	6. Individual or Joint/Group Filing (Check Applicable									
(Street) NASHVILLE TN 37203												X Form filed by One Reporting Person Form filed by More than One Reporting							
(City) (State) (Zip)												Person							
		Tab	le I - Non	-Deriv	ative	e Se	curitie	s Ad	quired,	Disp	osed c	of, or B	enefi	cially	y Owned	t			
1. Title of Security (Instr. 3)  2. Trans Date (Month/						ear)	Execution if any	A. Deemed xecution Date,		Code (Instr. 5)				5. Amor 4 and Securit Benefic Owned		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	Amount (A) or (D)		ice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common	Stock													247,380		D			
		7	āble II - I (						uired, D s, option						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 3)				6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisabl		epiration ate	Title	Amo or Num of Shai	ber					
Employee Stock Option (right to buy)	\$2.45	05/28/2009	05/28/20	009	A		5,000		05/28/2010	0 05	5/28/2017	Common Stock	5,0	00	\$0.00	5,000		D	
Employee Stock Option (right to	\$2.45	05/28/2009	05/28/20	009	A		5,000		05/28/2011	1 05	5/28/2017	Common Stock	5,0	00	\$0.00	5,000		D	

**Explanation of Responses:** 

Remarks:

Jeffrey McLaren

05/29/2009 \*\* Signature of Reporting Person Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).