FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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 and Address of Reporting Person* DANIELL JAMES						2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [HSTM]											5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
, DANII	LL JAW	<u> </u>															tor er (give title		10% Owner Other (specify below) Filing (Check Applicable Reporting Person e than One Reporting 6. Ownership Form: Direct (D) or Indirect Beneficia			
(Last) (First) (Middle) 132 BRIGHTON CLOSE						oate o / <mark>26/2</mark>	f Earliest 005	t Tran	saction	n (Mor	nth/D	ay/Year)		belov				specify				
(Street)	ILLE TI	N :	37205		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City) (State) (Zip)														Person								
		Tab	le I - Non-	-Deriva	ative	Se	curitie	s Ac	quire	ed, D	isp	osed c	of, or E	ene	ficiall	y Owne	d					
1. Title of Security (Instr. 3) 2. Transa Date (Month/E					ar) i	2A. Deem Executior if any (Month/Da	′ Co	Transaction Dispose Code (Instr. 5)			ities Acq d Of (D) (ies cially Following	Form (D) o	n: Direct r Indirect istr. 4)	of Indirect Beneficial Ownership				
									Co	ode	v	Amount	(A)	or	Price		ed ction(s) 3 and 4)			(Instr. 4)		
Common	Stock															37,173			D			
		Т	able II - D									sed of				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, Transactio			5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr.:	6. Date Exercisal Expiration Date (Month/Day/Year			Amount of		of es ing ve Se	curity	8. Price of Derivative Security (Instr. 5)		e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				c	Code	v	(A)	(D)	Date Exerci	ate cercisable		piration te	Title	or Nu of	umber							
Employee Stock Option (right to	\$2.88	05/26/2005	05/26/200	05	A		5,000		05/26	/2005	05/	/26/2013	Commo Stock	n 5	5,000	\$2.88	5,000)	D			

Explanation of Responses:

Remarks:

James Daniell MD

05/27/2005

** 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.