FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

287
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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*  PEARSON J EDWARD  (Last) (First) (Middle)  123 SECRETARIAT PLACE  (Street)  HENDERSONVILLE TN 37075						2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [ HSTM ]  3. Date of Earliest Transaction (Month/Day/Year) 11/19/2008  4. If Amendment, Date of Original Filed (Month/Day/Year)										S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director				
(City)	(Sta	ate) (2	Zip)													Pers	OH			
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D				action	2A. Exe	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,				5. Amo Securi Benefi	ount of ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v			Amount		(A) or (D)	Pric	e	Transaction(s) (Instr. 3 and 4)				(111341.4)			
Common Stock					11/19/2008		11/19/2008		P		1,000	)	A	\$2.55		14,400		D		
Common Stock 1					11/20/2008		11/20/2008		P		2,000		A	\$2.48		16,400		D		
Common Stock 11/2					0/2008		11/20/2008		P		1,000		Α	A \$2.45		5 17,400		D		
Common Stock 11/2					0/2008		11/20/2008		P		1,000		A \$2.4		.47	18,400		D		
Common Stoo	mmon Stock 11/20/2				/2008 1		1/20/	/2008	P		5,000		A	\$2.4		23,400		D		
		Та	ble II - D								sed of, onvertib					wned				
Security or E (Instr. 3) Pric	onversion Exercise ice of rivative curity	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	n Date, Code (I ay/Year)		ion str.	on of Derivative (Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expiration (Month/L)  Date Exercisa	on Date	Am Sec Unio Del Sec and		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of Title Shares		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	(D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

Remarks:

J. Edward Pearson

11/21/2008

\*\* 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.

 $<sup>^{\</sup>star}$  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).