BioTelemetry	y, Inc.									
Form 4 February 17,	2015									
•								OMB A	PPROVAL	
FORM	UNITED	STATES SE	CURITIES Washington			IGE (COMMISSION		3235-0287	
Check this box if no longer subject to Section 16. Section 16.			U					Expires:	January 31, 2005	
				NGES IN BENEFICIAL OWNERSHI SECURITIES				Estimated a burden hou	average	
Form 4 or Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 19						response	0.5	
obligation	¹⁸ Section $17(s$					•	f 1935 or Section	n		
may conti <i>See</i> Instru	inue.		he Investmei	•	• •					
1(b).										
(Print or Type R	Responses)									
1. Name and Address of Reporting Person _2. IssueGetz Heather CSymbol				nd Ticker or T	Frading	ç	5. Relationship of Reporting Person(s) to Issuer			
		•	BioTelemetry, Inc. [BEAT]				(Check all applicable)			
(Last)	(First) (M	(iddle) 3. E	Date of Earliest	Transaction			(Chee	k all applicable	2)	
			nth/Day/Year)			Director 10% Owner X Officer (give title Other (specify				
1000 CEDAR HOLLOW02ROAD, SUITE 10202			02/16/2015				below) below) Chief Financial Officer			
			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
			ed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
MALVERN	, PA 19355							Iore than One Re		
(City)	(State)	(Zip)	Table I - Non	-Derivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	any		3.4. Securities AcquiredTransaction(A) or Disposed ofCode(D)(Instr. 8)(Instr. 3, 4 and 5)			SecuritiesFBeneficially(OwnedI	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common			Code	V Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			
Common Stock	02/16/2015		А	17,133 (1)	А	\$0	108,924 <u>(2)</u>	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

Reporting Owners

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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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		20		8 C S (1
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options	\$ 10.36	02/16/2015		А	29,040	(3)	02/16/2025	Common Stock	29,040	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Getz Heather C 1000 CEDAR HOLLOW ROAD SUITE 102 MALVERN, PA 19355			Chief Financial Officer				
Signatures							
/s/Peter Ferola, by power of Attorney	02	2/17/2015					

**Signature of Reporting Person

Date

Explanation of Responses:

* 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).

Represents shares of the Issuer's common stock underlying restricted stock units (RSUs) awarded to the Reporting Person. The RSUs will
 (1) vest in full on the third anniversary of the grant date, subject to accelerated vesting upon certain terminations of employment following certain corporate transactions involving the Issuer. The shares of common stock underlying the RSUs will be issued when the RSUs vest.

- (2) Included 9,432 shares purchased pursuant to the Company's Employee Stock Purchase Plan.
- (3) The shares shall vest at the rate of 25% on December 31 and on each of the first, second, and third anniversaries of the Vesting Commencement Date, provided that the Option holder remains in Continuous Service through the applicable vesting date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.