BioTelemetry	y, Inc.										
Form 4 February 17,	2016										
•	1									PPROVAL	
Wa				CURITIES AND EXCHANGE CO Washington, D.C. 20549				COMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 10 Form 4 or Form 5 obligatior	suant to S	F CHANGES IN BENEFICIAL OW SECURITIES Section 16(a) of the Securities Exchang Public Utility Holding Company Act o					ge Act of 1934,	Expires: Estimated a burden hou response	irs per		
may conti <i>See</i> Instru 1(b).	nue.			vestment (•	• •			11		
(Print or Type R	esponses)										
Ferola Peter Sy			2. Issuer Name and Ticker or Trading Symbol				g	5. Relationship of Reporting Person(s) to Issuer			
			BioTelemetry, Inc. [BEAT]					(Check all applicable)			
(Last) (First) (Middle) 1000 CEDAR HOLLOW ROAD, SUITE 102			3. Date of Earliest Transaction (Month/Day/Year) 02/15/2016					Director 10% Owner X Officer (give title Other (specify below) below) General Counsel			
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
Fi MALVERN, PA 19355				Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecuri	ties Ac	quired, Disposed o	f. or Beneficia	llv Owned	
1.Title of Security (Instr. 3)	2. Transaction Data (Month/Day/Year)	Executio	med on Date, if	3. Transactic Code (Instr. 8)	4. Securit mAcquired Disposed	ties (A) o of (D	or I)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial	
Common Stock	02/15/2016			Code V A	Amount 8,098 (1)	or (D) A	Price \$ 0	(Instr. 3 and 4) 82,369 (2)	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. Transactic 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)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options	\$ 9.57	02/15/2016		А	13,726	(3)	02/15/2025	Common Stock	13,726

Reporting Owners

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

<u>**</u>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 25,871 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.