Surges Jeff Form 4 May 14, 2013

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box

if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue.

See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * Surges Jeff

(Last)

(First) (Middle)

200 EAST RANDOLPH STREET, SUITE 2435

(Street)

CHICAGO, IL 60601

2. Issuer Name and Ticker or Trading

Symbol

MERGE HEALTHCARE INC [MRGE]

3. Date of Earliest Transaction (Month/Day/Year)

05/13/2013

4. If Amendment, Date Original

Filed(Month/Day/Year)

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

_X__ Director

X_ Officer (give title

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Issuer

below)

(State) (City)

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3)

(Month/Day/Year)

(Zip)

3. 4. Securities TransactionAcquired (A) or Code (Instr. 8)

Disposed of (D) (Instr. 3, 4 and 5) 5. Amount of Securities Beneficially Owned Following Reported

6. Ownership Form: Direct (I) (Instr. 4)

7. Nature of Indirect (D) or Indirect Beneficial Ownership (Instr. 4)

10% Owner

Other (specify

OMB APPROVAL

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January 31,

2005

0.5

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Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

(Check all applicable)

Chief Executive Officer

6. Individual or Joint/Group Filing(Check

Estimated average

burden hours per

(A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

1. Title of Derivative Conversion 3. Transaction Date 3A. Deemed

(Month/Day/Year) Execution Date, if

5. Number of TransactionDerivative

6. Date Exercisable and **Expiration Date**

7. Title and Amount Underlying Securities

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A Disposed of (Instr. 3, 4, a 5)	(D)	(D)		(Instr. 3 and 4	l)
				Code V	/ (A)	(D)	Date Exercisable	Expiration Date	Title	Amour Number Shares
Stock Options	\$ 3.24	05/13/2013		A	750,000		11/05/2010(1)	11/04/2016	Common Stock	750,0

Reporting Owners

Reporting Owner Name / Address	Relationships						
2	Director	10% Owner	Officer	Other			
Surges Jeff 200 EAST RANDOLPH STREET SUITE 2435 CHICAGO, IL 60601	X		Chief Executive Officer				

Signatures

/s/ Julie Ann B. Schumitsch, by Power of Attorney for Jeffery A. 05/14/2013 Surges

> **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).
- Nonqualified stock options to purchase 585,000 shares of Common Stock vesting on the date of grant and 165,000 shares of Common Stock vesting on November 5, 2013.
 - As previously reported on a Form 4 filed on November 9, 2010 by the reporting person, as amended by a Form 4/A filed on November 12, 2010, the reporting person reported acquiring stock options to purchase 1,500,000 shares of common stock pursuant to the 2005
- (2) Equity Incentive Plan of Merge Healthcare Incorporated (the "Company"). However, the Company subsequently determined that stock options to purchase 975,000 shares of common stock exceeded the limit on the number of stock options that may be granted to any individual participant within any calendar year and the Company's Compensation Committee cancelled those stock options.

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.

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