ALPHARMA INC Form SC 13G/A February 17, 2009

SECURITIES & EXCHANGE COMMISSION Washington, D.C. 20549

SCHEDULE 13G (Rule 13d-102)

INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT TO RULES 13d-1(b), (c) AND (d) AND AMENDMENTS THERETO FILED PURSUANT TO 13d-2(b)

(Amendment No.1) \*

ALPHARMA INC. (Name of Issuer)

Common Stock (Title of Class of Securities)

20813101 (CUSIP Number)

December 31, 2008 (Date of event which requires filing of this statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

- [ ] Rule 13d-1(b)
- [x] Rule 13d-1(c)
- [ ] Rule 13d-1(d)

(Page 1 of 20 Pages)

\*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for purposes of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

\_\_\_\_\_

(1)	NAMES OF REPORTING PERSONS HealthCor Management, L.P.	
	I.R.S. IDENTIFICATION NO. OF ABOVE PERSONS (ENTITI 20-2893581	ES ONLY)
(2)	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP *	(a) [X]
	SEC USE ONLY	
(4)	CITIZENSHIP OR PLACE OF ORGANIZATION  Delaware	
NUMBER OF	(5) SOLE VOTING POWER 0	
SHARES		
BENEFICIALL	Y (6) SHARED VOTING POWER	
OWNED BY	0	
EACH	(7) SOLE DISPOSITIVE POWER	
REPORTING	0	
PERSON WITH	(8) SHARED DISPOSITIVE POWER 0	
(9)	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 0	
(10)	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES **	[ ]
(11)	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 0.00%	
(12)	TYPE OF REPORTING PERSON **	
	** SEE INSTRUCTIONS BEFORE FILLING OUT!	
CUSIP No. 2		Page 3 of 20 Pages
(1)	NAMES OF REPORTING PERSONS HealthCor Associates, LLC	
	I.R.S. IDENTIFICATION NO. OF ABOVE PERSONS (ENTITI 20-2891849	ES ONLY)

(2)	CHECK T	HE APPROPRIATE BOX IF A MEMBER OF A GROUP	(a) [X] (b) [ ]
(3)	SEC USE	ONLY	
	CITIZEN Delawar	SHIP OR PLACE OF ORGANIZATION e	
NUMBER OF	(5)	SOLE VOTING POWER	
SHARES			
		SHARED VOTING POWER 0	
OWNED BY			
EACH	(7)	SOLE DISPOSITIVE POWER 0	
REPORTING			
PERSON WITH	(8)	SHARED DISPOSITIVE POWER 0	
(9)		TE AMOUNT BENEFICIALLY OWNED REPORTING PERSON	
(10)	IN ROW	OX IF THE AGGREGATE AMOUNT (9) EXCLUDES CERTAIN SHARES **	[ ]
(11)	PERCENT	OF CLASS REPRESENTED NT IN ROW (9)	
(12)		REPORTING PERSON ** mited liability company	
		** SEE INSTRUCTIONS BEFORE FILLING OUT!	
CUSIP No. 2	0813101	13G/A	Page 4 of 20 Pages
(1)		F REPORTING PERSONS or Offshore, Ltd.	
	I.R.S.	IDENTIFICATION NO. OF ABOVE PERSONS (ENTI	FIES ONLY)
(2)	CHECK T	HE APPROPRIATE BOX IF A MEMBER OF A GROUP	** (a) [X] (b) []
(3)	SEC USE	ONLY	
(4)	 CITIZEN Cayman	SHIP OR PLACE OF ORGANIZATION Islands	

NUMBER OF	(	5)	SOLE 0	VOTIN	G POW	:==== 1ER									
SHARES	-														
BENEFICIALLY	Y (	6)	SHARE 0	ED VOT	ING P	OWER									
OWNED BY	-														
EACH	(	7)	SOLE 0	DISPO	SITIV	'E POV	VER								
REPORTING	-														
PERSON WITH	(	8)	SHARE 0	ED DIS	POSIT	IVE E	POWER								
(9)				OUNT B			LY OWN	===== ED							
(10)				THE A										[ ]	
(11)		MOU		LASS R ROW (		ENTED	)								
(12)				RTING :		)N **									
CUSIP No. 20	08131	01		SEE IN	STRUC	130		KE FI.	TTT T 14/	9 001:		e 5 (	of	20	Pages
(1)				ORTING			 und, L	.P.							
	I.R.	S.	IDENT	IFICAT	ION N	IO. OF	ABOV	E PER	SONS	(ENTI	TIES	ONLY	)		
(2)	CHEC	K T	HE APE				 F A ME				**	(a) (b)			
(3)	SEC	USE	ONLY												
(4)			SHIP ( Island		CE OF			ION							
NUMBER OF	(	5)	SOLE 0	VOTIN	G POW										
SHARES	-														
BENEFICIALLY	Υ (	6)	SHARE 0	ED VOT	ING P	OWER									

OWNED BY									
EACH	(7)	) SOLE DI	SPOSITIVE	POWER					
REPORTING									
PERSON WITH	(8)	) SHARED 0	DISPOSITIV	E POWER					
(9)			T BENEFICI EPORTING P						
(10)			E AGGREGAT	TE AMOUNT AIN SHARES	**			[]	
		OUNT IN RO	S REPRESEN W (9)	TED					
		OF REPORTI limited co	NG PERSON mpany	**					
		** SEE	INSTRUCTI	ONS BEFORE	FILLING OUT!				
CUSIP No. 20	)813101	1		13G/A		Page	6 of	20	Pages
(1)			ING PERSON						
	I.R.S.	. IDENTIFI	CATION NO.	OF ABOVE	PERSONS (ENTIT	TIES ON	NLY)		
(2)	CHECK	THE APPRO	PRIATE BOX	X IF A MEMB	ER OF A GROUP		(a) (b)		
(3)	SEC US	SE ONLY							
		ENSHIP OR n Islands	PLACE OF C	PRGANIZATIO	N				
NUMBER OF	(5)	) SOLE VO	TING POWER	₹					
SHARES									
BENEFICIALLY	7 (6)	SHARED 0	VOTING POW	IER					
OWNED BY									
EACH	(7)	) SOLE DI 0	SPOSITIVE	POWER					
REPORTING PERSON WITH	(8)	) SHARED	DISPOSITIV	Æ POWER					

(9)			TE AMOUNT BENEFICIALLY OWNED REPORTING PERSON	
(10)			OX IF THE AGGREGATE AMOUNT (9) EXCLUDES CERTAIN SHARES **	[ ]
(11)		AMOU	OF CLASS REPRESENTED NT IN ROW (9)	
(12)			REPORTING PERSON ** mited company	
			** SEE INSTRUCTIONS BEFORE FILLING OUT!	
CUCID No. 2	0013	1 0 1	120/7	Dans 7 of 20 Danses
CUSIP No. 2	0813	101	13G/A	Page 7 of 20 Pages
(1)			F REPORTING PERSONS or Hybrid Offshore, Ltd.	
	I.R	.S.	IDENTIFICATION NO. OF ABOVE PERSONS (ENTIT	'IES ONLY)
(2)	CHE	CK T	HE APPROPRIATE BOX IF A MEMBER OF A GROUP	** (a) [X] (b) []
(3)	SEC	USE	ONLY	
(4)			SHIP OR PLACE OF ORGANIZATION Islands	
NUMBER OF		(5)	SOLE VOTING POWER	
SHARES				
BENEFICIALL	Y		SHARED VOTING POWER	
OWNED BY			0	
EACH		(7)	SOLE DISPOSITIVE POWER	
REPORTING				
PERSON WITH		(8)	SHARED DISPOSITIVE POWER 0	
(9)			TE AMOUNT BENEFICIALLY OWNED REPORTING PERSON	
(10)			OX IF THE AGGREGATE AMOUNT (9) EXCLUDES CERTAIN SHARES **	[]

		JOMA	OF CLASS RE NT IN ROW (9		ED				
			REPORTING F		*				
			** SEE INS	TRUCTIO	NS BEFORE	FILLING OU	JT!		
CUSIP No. 20	)813:	101		1	3G/A		Pag	je 8 oi	f 20 Pages
	NAMI L.P		F REPORTING	PERSONS	HealthCor	Hybrid Of	ffshore	Masteı	Fund,
(2)			IDENTIFICATI					ONLY)  (a) (b)	
(3)	SEC	USE	ONLY						
			SHIP OR PLAC Islands	E OF OR					
NUMBER OF		(5)	SOLE VOTING	POWER					
SHARES	-								
BENEFICIALLY OWNED BY	Z	(6)	SHARED VOTI	ING POWE	R				
EACH			SOLE DISPOS	SITIVE P	OWER				
REPORTING	-								
PERSON WITH		(8)	SHARED DISP	OSITIVE					
(9)			TE AMOUNT BE REPORTING F						
(10)			OX IF THE AG			*			[ ]
		JOMA	OF CLASS RE		ED				
(12)			REPORTING F		*				

\*\* SEE INSTRUCTIONS BEFORE FILLING OUT!

CUSIP No. 2	08131	L01	130	G/A	Page	9 of	20 1	Pages
(1)		-	F REPORTING PERSONS or Hybrid Offshore GE	P, LLC				
	I.R.	.S.	IDENTIFICATION NO. OF	F ABOVE PERSONS (ENTIT	IES ON	ILY)		
(2)	CHEC	CK T	HE APPROPRIATE BOX IE	F A MEMBER OF A GROUP		(a) (b)		
(3)	SEC	USE	ONLY					
(4)			GHIP OR PLACE OF ORGA	ANIZATION				
NUMBER OF	(	(5)	SOLE VOTING POWER					
SHARES	-							
BENEFICIALL	Υ (	(6)	SHARED VOTING POWER					
OWNED BY	-		0					
EACH	(	(7)	SOLE DISPOSITIVE POW	WER				
REPORTING	-							
PERSON WITH	(	(8)	SHARED DISPOSITIVE E	POWER				
(9)			TE AMOUNT BENEFICIALI REPORTING PERSON	LY OWNED				
(10)	IN R	ROW	OX IF THE AGGREGATE A (9) EXCLUDES CERTAIN	SHARES **			[ ]	
(11)	PERC	CENT AMOU	OF CLASS REPRESENTED					
(12)			REPORTING PERSON **					
			** SEE INSTRUCTIONS	S BEFORE FILLING OUT!				

(1)	NAMES OF REPORTING PERSONS HealthCor Group, LLC		
	I.R.S. IDENTIFICATION NO. OF ABOVE PERSONS (ENTITIES 51-0551771	ONLY)	
(2)	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP **		[X]
(3)	SEC USE ONLY		
` '	CITIZENSHIP OR PLACE OF ORGANIZATION Delaware		
NUMBER OF	(5) SOLE VOTING POWER 0		
SHARES			
	Y (6) SHARED VOTING POWER 0		
OWNED BY			
EACH	(7) SOLE DISPOSITIVE POWER 0		
REPORTING	<u>_</u>		
PERSON WITH	(8) SHARED DISPOSITIVE POWER 0		
(9)	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 0		
(10)	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES **		[ ]
(11)	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 0.00%		
(12)	TYPE OF REPORTING PERSON ** OO - limited liability company		
	** SEE INSTRUCTIONS BEFORE FILLING OUT!		
CUSIP No. 2	0813101 13G/A Pag	e 11 c	f 20 Pages
(1)	NAMES OF REPORTING PERSONS HealthCor Capital, L.P.		

I.R.S. IDENTIFICATION NO. OF ABOVE PERSONS (ENTITIES ONLY)

	51-0	551	770				
(2)	CHEC	K TI	HE APPROPRIATE BOX IF A MEMBER OF A GROUP *	*		[X]	
(3)	SEC	USE	ONLY				
(4)	CITI Dela		SHIP OR PLACE OF ORGANIZATION				
NUMBER OF	(	5)	SOLE VOTING POWER 0				
SHARES	-						
	Υ (	6)	SHARED VOTING POWER 0				
OWNED BY  EACH  REPORTING	(	7)	SOLE DISPOSITIVE POWER 0				
	. (	8)	SHARED DISPOSITIVE POWER 0				
(9)			TE AMOUNT BENEFICIALLY OWNED REPORTING PERSON				
(10)			OX IF THE AGGREGATE AMOUNT (9) EXCLUDES CERTAIN SHARES **			[	]
(11)		MOUI	OF CLASS REPRESENTED NT IN ROW (9)				
(12)	TYPE PN	OF	REPORTING PERSON **				
			** SEE INSTRUCTIONS BEFORE FILLING OUT!				
CUSIP No. 2	08131	01	13G/A P	age	12 0	of 20	Pages
(1)			F REPORTING PERSONS Dr, L.P.				
	I.R. 20-3		IDENTIFICATION NO. OF ABOVE PERSONS (ENTITI	ES C	NLY)		
(2)	CHEC	K TI	HE APPROPRIATE BOX IF A MEMBER OF A GROUP *	*		[X]	
(3)	SEC	USE	ONLY				

		SHIP OR PLACE OF ORGANIZATION e			
NUMBER OF	(5)	SOLE VOTING POWER 0			
SHARES					
BENEFICIAL	LLY (6)	SHARED VOTING POWER			
OWNED BY		0			
EACH		SOLE DISPOSITIVE POWER 0			
REPORTING					
PERSON WIT	CH (8)	SHARED DISPOSITIVE POWER 0			
(9)	BY EACH	TE AMOUNT BENEFICIALLY OWNED REPORTING PERSON			
(10)	CHECK E	OX IF THE AGGREGATE AMOUNT (9) EXCLUDES CERTAIN SHARES **		[ ]	
(11)		OF CLASS REPRESENTED NT IN ROW (9)			
(12)	TYPE OF	REPORTING PERSON **			
		** SEE INSTRUCTIONS BEFORE FILLING OUT!	,		
CUSIP No.	20813101	13G/A Pag	ge 13 o	f 20	Pages
(1)	NAMES C	F REPORTING PERSONS Cohen			
	I.R.S.	IDENTIFICATION NO. OF ABOVE PERSONS (ENTITIES	ONLY)		
(2)	CHECK I	HE APPROPRIATE BOX IF A MEMBER OF A GROUP **	(a) (b)		
(3)	SEC USE	ONLY			
(4)	CITIZEN United	SHIP OR PLACE OF ORGANIZATION States			
NUMBER OF	(5)	SOLE VOTING POWER 0			

SHARES					
BENEFICIALLY	Z (6)	SHARED VOTING POWER			
OWNED BY					
EACH	(7)	SOLE DISPOSITIVE POWER 0			
REPORTING					
PERSON WITH	(8)	SHARED DISPOSITIVE POWER 0			
(9)		ATE AMOUNT BENEFICIALLY OWNED H REPORTING PERSON			
(10)		30X IF THE AGGREGATE AMOUNT (9) EXCLUDES CERTAIN SHARES **			[ ]
(11)		OF CLASS REPRESENTED  JNT IN ROW (9)			
(12)	TYPE OF	REPORTING PERSON **			
CUSIP No. 20	0813101	13G/A	Page 14	of	20 Pages
(1)	NAMES (	OF REPORTING PERSONS Healey			
	I.R.S.	IDENTIFICATION NO. OF ABOVE PERSONS (ENTIT	TIES ONI	ĽΥ)	
(2)	CHECK T	THE APPROPRIATE BOX IF A MEMBER OF A GROUP	(a	ı) [	
(3)	SEC USE				
NUMBER OF	CITIZEN United	CONLY			
SHARES	United	CONLY			
BENEFICIALLY	United	CONLY  NSHIP OR PLACE OF ORGANIZATION  States  SOLE VOTING POWER			
OLINED D.	United  (5)	SOLE VOTING POWER 0			
OWNED BY	United  (5)	SONLY  SHIP OR PLACE OF ORGANIZATION  States  SOLE VOTING POWER  0  SHARED VOTING POWER			
OWNED BY	United(5)	SONLY  SHIP OR PLACE OF ORGANIZATION  States  SOLE VOTING POWER  0  SHARED VOTING POWER			

PERSON WITH	H (8) SHARED DISPOSITIVE POWER 0	
(9)	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 0	
(10)	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES **	[ ]
(11)	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 0.00%	
(12)	TYPE OF REPORTING PERSON ** IN	
	** SEE INSTRUCTIONS BEFORE FILLING OUT!	

CUSIP No. 20813101

13G/A

Page 15 of 20 Pages

Item 1(b). Address of Issuer's Principal Executive Offices:
 440 Route 22 East
 Bridgewater, NJ 08807

Item 2(a, b, c). Name of Person Filing:

- (i) HealthCor Management, L.P., a Delaware limited partnership; Carnegie Hall Tower, 152 West 57th Street, 47th Floor, New York, New York 10019;
- (ii) HealthCor Associates, LLC, a Delaware limited liability company, Carnegie Hall Tower, 152 West 57th Street, 47th Floor, New York, New York 10019;
- (iii) HealthCor Offshore, Ltd., a Cayman Islands limited company, Carnegie Hall Tower, 152 West 57th Street, 47th Floor, New York, New York 10019;
- (iv) HealthCor Offshore Master Fund, L.P., a Cayman Islands limited partnership, Carnegie Hall Tower, 152 West 57th Street, 47th Floor, New York, New York 10019;
- (v) HealthCor Offshore GP, LLC, a Delaware limited liability company, Carnegie Hall Tower, 152 West 57th Street, 47th Floor, New York, New York 10019;
- (vi) HealthCor Hybrid Offshore, Ltd., a Cayman Islands limited company, Carnegie Hall Tower, 152 West 57th Street, 47th Floor, New York, New York 10019;
- (vii) HealthCor Hybrid Offshore Master Fund, L.P., a Cayman

Islands limited partnership, Carnegie Hall Tower, 152 West 57th Street, 47th Floor, New York, New York 10019;

- (viii) HealthCor Hybrid Offshore GP, LLC, a Delaware limited liability company, Carnegie Hall Tower, 152 West 57th Street, 47th Floor, New York, New York 10019;
- (ix) HealthCor Group, LLC, a Delaware limited liability company, Carnegie Hall Tower, 152 West 57th Street, 47th Floor, New York, New York 10019;
- (x) HealthCor Capital, L.P., a Delaware limited partnership, Carnegie Hall Tower, 152 West 57th Street, 47th Floor, New York, New York 10019;
- (xi) HealthCor, L.P., a Delaware limited partnership, Carnegie Hall Tower, 152 West 57th Street, 47th Floor, New York, New York 10019;

CUSIP No. 20813101

13G/A

Page 16 of 20 Pages

(xii) Joseph Healey; Carnegie Hall Tower, 152 West 57th Street, 47th Floor, New York, New York 10019; and

(xiii) Arthur Cohen, 12 South Main Street, #203 Norwalk, Ct 06854.

Both Mr. Healey and Mr. Cohen are United States citizens.

The persons at (i) through (xiii) above are collectively referred to herein as the "Reporting Persons".

- Item 2(e). CUSIP Number: 20813101
- Item 3. Not applicable.
- Item 4. Ownership.

The information required by Items 4(a) - (c) is set forth in Rows 5 - 11 of the cover page for each Reporting Person hereto and is incorporated herein by reference for each such Reporting Person. Holdings of Common Stock are as of February 11, 2009.

Collectively, HealthCor, L.P., Healthcor Offshore Master Fund, L.P. and HealthCor Hybrid Offshore Master Fund, L.P. (each a "Fund" and together, the "Funds") are the beneficial owners of a total of O shares of the Common Stock of the Issuer. By virtue of their position as feeder funds, HealthCor Offshore, Ltd. and HealthCor Hybrid Offshore, Ltd. may be deemed beneficial owners of the shares of Common Stock owned by HealthCor Offshore Master Fund, L.P., and HealthCor Hybrid Offshore Master Fund, L.P., respectively.

HealthCor Offshore GP, LLC is the general partner of HealthCor Offshore Master Fund, L.P. Accordingly, HealthCor Offshore GP, LLC may

be deemed to beneficially own the shares of Common Stock that are beneficially owned by HealthCor Offshore Master Fund, L.P. HealthCor Group, LLC is the general partner of HealthCor Offshore GP, LLC and, therefore, may be deemed to beneficially own the shares of Common Stock that are beneficially owned by HealthCor Offshore Master Fund, L.P.

HealthCor Hybrid Offshore GP, LLC is the general partner of HealthCor Hybrid Offshore Master Fund, L.P. Accordingly, HealthCor Hybrid Offshore GP, LLC may be deemed to beneficially own the shares of Common Stock that are beneficially owned by HealthCor Hybrid Offshore Master Fund, L.P. HealthCor Group, LLC is the general partner of HealthCor Hybrid Offshore GP, LLC and, therefore, may be deemed to beneficially own the shares of Common Stock that are beneficially owned by HealthCor Hybrid Offshore Master Fund, L.P.

By virtue of its position as the investment manager of the Funds, HealthCor Management, L.P. may be deemed a beneficial owner of all

CUSIP No. 20813101

13G/A

Page 17 of 20 Pages

the shares of Common Stock owned by the Funds. HealthCor Associates, LLC is the general partner of HealthCor Management, L.P. and thus may also be deemed to beneficially own the shares of Common Stock that are beneficially owned by the Funds.

HealthCor Group LLC is the general partner of HealthCor Capital, L.P., which is in turn the general partner of HealthCor, L.P. Accordingly, each of HealthCor Capital L.P. and HealthCor Group, LLC may be deemed to beneficially own the shares of Common Stock that are beneficially owned by HealthCor, L.P.

As the Managers of HealthCor Associates, LLC, Arthur Cohen and Joseph Healey exercise both voting and investment power with respect to the shares of Common Stock reported herein, and therefore each may be deemed a beneficial owner of such Common Stock.

Each of the Reporting Persons hereby disclaims any beneficial ownership of any such Shares in excess of their actual pecuniary interest therein.

Item 5. Ownership of Five Percent or Less of a Class:

If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be the beneficial owner of more than five percent of the class of securities, check the following [X].

- Item 6. Ownership of More than Five Percent on Behalf of Another Person. Not Applicable
- Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on by the Parent Holding Company. Not Applicable
- Item 8. Identification and Classification of Members of the Group.

Not Applicable

Item 9. Notice of Dissolution of Group. Not Applicable

CUSIP No. 20813101

13G/A Page 18 of 20 Pages

Item 10. Certification.

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect.

Exhibits:

Exhibit I: Joint Acquisition Statement, dated as of February 17, 2009.

CUSIP No. 20813101

13G/A

Page 19 of 20 Pages

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

DATED: February 17, 2009

HEALTHCOR MANAGEMENT, L.P., for itself and as manager on behalf of (i) HEALTHCOR OFFSHORE, LTD. and (ii) HEALTHCOR HYBRID OFFSHORE, LTD.

By: HealthCor Associates, LLC, its general partner

By: /s/ John H. Coghlin

\_\_\_\_\_

Name: John H. Coghlin Title: General Counsel

HEALTHCOR CAPITAL, L.P., for itself and as general partner on behalf of HEALTHCOR L.P.

By: HealthCor Group, LLC, its general partner

By: /s/ John H. Coghlin

\_\_\_\_\_

Name: John H. Coghlin Title: General Counsel

HEALTHCOR OFFSHORE GP, LLC, for itself and as general partner of behalf of HEALTHCOR OFFSHORE MASTER FUND, L.P.

By: HealthCor Group, LLC, its general partner

By: /s/ John H. Coghlin

-----

Name: John H. Coghlin Title: General Counsel

HEALTHCOR HYBRID OFFSHORE GP, LLC, for itself and as general partner of behalf of HEALTHCOR HYBRID OFFSHORE MASTER FUND, L.P.

By: HealthCor Group, LLC, its general partner

By: /s/ John H. Coghlin

-----

Name: John H. Coghlin Title: General Counsel

HEALTHCOR ASSOCIATES, LLC

By: /s/ John H. Coghlin

Name: John H. Coghlin Title: General Counsel

CUSIP No. 20813101

13G/A

Page 20 of 20 Pages

HEALTHCOR GROUP, LLC

By: /s/ John H. Coghlin

-----

Name: John H. Coghlin Title: General Counsel

JOSEPH HEALEY, Individually

/s/ Joseph Healey

-----

ARTHUR COHEN, Individually

/s/ Arthur Cohen

\_\_\_\_\_

EXHIBIT 1

JOINT ACQUISITION STATEMENT PURSUANT TO RULE 13d-1(k)

The undersigned acknowledge and agree that the foregoing statement on Schedule 13G/A is filed on behalf of each of the undersigned and that all subsequent amendments to this statement on Schedule 13G/A shall be filed on behalf of each of the undersigned without the necessity of filing additional

joint acquisition statements. The undersigned acknowledge that each shall be responsible for the completeness and accuracy of the information concerning the others, except to the extent that he or it knows or has reason to believe that such information is inaccurate.

Dated: February 17, 2009

HEALTHCOR MANAGEMENT, L.P., for itself and as manager on behalf of (i) HEALTHCOR OFFSHORE, LTD. and (ii) HEALTHCOR HYBRID OFFSHORE, LTD.

By: HealthCor Associates, LLC, its general partner

By: /s/ John H. Coghlin

\_\_\_\_\_

Name: John H. Coghlin Title: General Counsel

HEALTHCOR CAPITAL, L.P., for itself and as general partner on behalf of HEALTHCOR L.P.

By: HealthCor Group, LLC, its general partner

By: /s/ John H. Coghlin

\_\_\_\_\_

Name: John H. Coghlin Title: General Counsel

HEALTHCOR OFFSHORE GP, LLC, for itself and as general partner of behalf of HEALTHCOR OFFSHORE MASTER FUND, L.P.

By: HealthCor Group, LLC, its general partner

By: /s/ John H. Coghlin

\_\_\_\_\_

Name: John H. Coghlin Title: General Counsel

HEALTHCOR HYBRID OFFSHORE GP, LLC, for itself and as general partner of behalf of HEALTHCOR HYBRID OFFSHORE MASTER FUND, L.P.

By:  $HealthCor\ Group$ , LLC, its general partner

By: /s/ John H. Coghlin

\_\_\_\_\_

Name: John H. Coghlin Title: General Counsel

HEALTHCOR ASSOCIATES, LLC

By: /s/ John H. Coghlin

-----

Name: John H. Coghlin Title: General Counsel

HEALTHCOR GROUP, LLC