#### SYNERGETICS USA INC

Form 4

September 23, 2005

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** OMB

3235-0287 Number:

January 31, Expires: 2005

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if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

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

1(b).

Common

Stock

09/21/2005

(Print or Type Responses)

1. Name and Address of Reporting Person * Scheller Gregg D			2. Issuer Name <b>and</b> Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer				
			SYNER	SYNERGETICS USA INC [SURG]					(Check all applicable)			
(Last)	(First)	(Middle)		Earliest Tr	ansaction			W D'	100	0		
3845 CORPORATE CENTRE DRIVE			(Month/Day/Year) 09/21/2005					_X_ Director 10% Owner X_ Officer (give title Other (specify below) below)  President & CEO				
(Street) 4. If Amo			4. If Ame	mendment, Date Original				6. Individual or Joint/Group Filing(Check				
O'FALLON, MO 63368			Filed(Mon	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative Se	curiti	es Acq	uired, Disposed o	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	Execution any	med on Date, if Day/Year)	3. Transactic Code (Instr. 8)	4. Securitie on(A) or Disp (Instr. 3, 4	osed c	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	09/21/2005			A	817,020	A	( <u>1</u> )	817,020 (2)	I	By wife.		

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

A

807,840 A

<u>(3)</u>

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.

807,840

D

#### Edgar Filing: SYNERGETICS USA INC - Form 4

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

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transacti	5. orNumber	6. Date Exerc Expiration D		7. Title		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Tear)	any (Month/Day/Year)	Code (Instr. 8)	of	(Month/Day/		Underly Securiti (Instr. 3	ying ies	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title N	Amount or Number of Shares		

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Scheller Gregg D							
3845 CORPORATE CENTRE DRIVE	X		President & CEO				

### **Signatures**

O'FALLON, MO 63368

/s/ Gregg D. Scheller 09/23/2005 \*\*Signature of Date Reporting Person

## **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).
- Received in exchange for 178,000 shares of Synergetics, Inc. common stock in connection with the merger of Valley Forge Scientific Corp. and Synergetics, Inc.
- The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the **(2)** reporting person is the beneficial owner of the securities for Section 16 or any other purpose.
- Received in exchange for 176,000 shares of Synergetics, Inc. common stock in connection with the merger of Valley Forge Scientific Corp. and Synergetics, Inc.

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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