## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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l	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average b	urden								

0.5

hours per response:

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(b) of the Investment Company Act of 1940

					U	Jecu	011 30(11)	OI LITE	HIVE	Suncin	Con	party Act c	JI 1940								
1. Name and Address of Reporting Person*  HARRISON DONALD C				2. Issuer Name <b>and</b> Ticker or Trading Symbol EnteroMedics Inc [ ETRM ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
HAIN	ISON DC	MALD C													X	Director	•		10% Ov	vner	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 05/05/2009										Officer ( below)	(give title		Other (s below)	pecify	
2800 PA	TTON ROA	AD																			
(Chroat)					4. 1											6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) ST. PAU	t M	īNī	55113												X	Form fil	ed by One	Repo	rting Persor	ո	
51. PAU	JL MN 55113												Form filed by More than One Reporting Person								
(City)	(City) (State) (Zip)																				
		Tal	ole I - Nor	n-Deri	vativ	e Se	curitie	s Ac	qui	ired, C	Disp	osed of	f, or Be	nefi	cially	Owned					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date if any (Month/Day/Ye		Code (I		action Disposed		ities Acquired (A) d Of (D) (Instr. 3, 4		4 and Securiti Benefici Owned		s illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	(A) (D)	(A) or (D) Pri		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock															27,927		D			
Common Stock															712,544		I		Charter Life Sciences,		
																				L.P. <sup>(2)</sup>	
			Table II -									sed of, onvertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	conversion Date r Exercise (Month/Day/Year) rrice of perivative		ate,	Code (Instr.		5. Number of		6. Date Exer Expiration E (Month/Day)		ercisable and Date		7. Title and Ar of Securities Underlying Derivative Sec (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Date	e	E	xpiration		or	nount mber						
					Code	٧	(A)	(D)	Exe	rcisable	0	ate	Title	Sha	ares						
Warrants (right to buy)	\$0.4333									(1)	1	1/13/2010	Common	<sup>1</sup> 1,	015		1,015	5	D		
Warrants (right to buy)	\$0.46									(1)	1	2/12/2010	Common Stock	16	,484		16,48	4	I	Charter Life Sciences, L.P. <sup>(2)</sup>	
Stock Option (Right to Buy)	\$8									(3)	0	3/25/2018	Commo Stock	25	,000		25,00	0	D		
Stock Option (Right to Buy)	\$1.93	05/05/2009			A		10,000		05/0	05/2009 <sup>(4</sup>	4) 0	5/05/2019	Commo	10	,000	\$0.00	10,00	0	D		

## **Explanation of Responses:**

- 1. Immediately exercisable.
- 2. The reporting person is managing partner of Charter Life Sciences, L.P. The reporting person disclaims beneficial ownership of these shares except to the extent of his proportionate pecuniary interest therein.
- 3. Vests as to 25% immediately and then 1/36th per month thereafter. The vesting stops when reporting person ceases to be a director, if that occurs before the grant is fully vested.
- 4. Vests as to 25% on date noted and thereafter in cumulative installments of 1/36th per month.

/s/ Mark B. Knudson, Attorney- 05/06/2009 in-Fact

\*\* Signature of Reporting Person

Date

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

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.