

Cosmo Battinelli  
 Form 3  
 July 25, 2011

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF 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)

|                                                                                                                                                                                                                                                      |                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>1. Name and Address of Reporting Person *</p> <p>Â Cosmo Battinelli</p> <p>(Last) (First) (Middle)</p> <p>222 MERCHANDISE MART<br/>                 PLAZA,Â SUITE 2024</p> <p>(Street)</p> <p>CHICAGO,Â ILÂ 60654</p> <p>(City) (State) (Zip)</p> | <p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>07/12/2011</p> | <p>3. Issuer Name and Ticker or Trading Symbol</p> <p>ALLSCRIPTS HEALTHCARE SOLUTIONS, INC.<br/>                 [MDRX]</p> <p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner<br/> <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other<br/>                 (give title below) (specify below)<br/>                 SVP, Support</p> | <p>5. If Amendment, Date Original Filed(Month/Day/Year)</p> <p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person<br/> <input type="checkbox"/> Form filed by More than One Reporting Person</p> |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Table I - Non-Derivative Securities Beneficially Owned**

| 1. Title of Security<br>(Instr. 4) | 2. Amount of Securities Beneficially Owned<br>(Instr. 4) | 3. Ownership Form:<br>Direct (D)<br>or Indirect (I)<br>(Instr. 5) | 4. Nature of Indirect Beneficial Ownership<br>(Instr. 5) |
|------------------------------------|----------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------------------|
| Common Stock                       | 19,783 <sup>(1)</sup>                                    | D                                                                 | Â                                                        |

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

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

| 1. Title of Derivative Security<br>(Instr. 4) | 2. Date Exercisable and Expiration Date<br>(Month/Day/Year) | 3. Title and Amount of Securities Underlying Derivative Security<br>(Instr. 4)<br>Title | 4. Conversion or Exercise Price of Derivative | 5. Ownership Form of Derivative Security: | 6. Nature of Indirect Beneficial Ownership<br>(Instr. 5) |
|-----------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------|----------------------------------------------------------|
|-----------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------|----------------------------------------------------------|

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|              | Date Exercisable | Expiration Date | Amount or Number of Shares | Security | Direct (D) or Indirect (I) (Instr. 5) |
|--------------|------------------|-----------------|----------------------------|----------|---------------------------------------|
| Stock Option | Â (2)            | 08/14/2015      | Common Stock 12,000 (2)    | \$ 19.25 | D Â                                   |
| Stock Option | Â (3)            | 11/16/2016      | Common Stock 12,600 (3)    | \$ 16.78 | D Â                                   |
| Stock Option | 08/14/2010       | 08/14/2015      | Common Stock 12,000 (4)    | \$ 19.25 | D Â                                   |

## Reporting Owners

| Reporting Owner Name / Address                                                    | Relationships |           |                |       |
|-----------------------------------------------------------------------------------|---------------|-----------|----------------|-------|
|                                                                                   | Director      | 10% Owner | Officer        | Other |
| Cosmo Battinelli<br>222 MERCHANDISE MART PLAZA<br>SUITE 2024<br>CHICAGO, IL 60654 | Â             | Â         | Â SVP, Support | Â     |

## Signatures

Kathie Kittner by power of attorney for Cosmo Battinelli  
07/25/2011

\_\_Signature of Reporting Person Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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).
- (1) Of the 19,783 shares beneficially owned, 4,402 are vested Restricted Stock Units (RSUs) granted under the Allscripts Healthcare Solutions, Inc. 1993 Stock Incentive Plan and one (1) share obtained through the reporting person's involvement in the Company's Employee Stock Purchase Plan. An additional 1,675 RSUs will vest in 2011; 4,681 RSUs will vest in 2012; 3,008 RSUs will vest in 2013; 3,008 RSUs will vest in 2014 and 3,008 will vest in 2015.
- (2) Received pursuant to the Agreement and Plan of Merger, dated as of June 9, 2010, among Allscripts-Misys Healthcare Solutions, Inc. (which has changed its name to Allscripts Healthcare Solutions, Inc.) ("Allscripts"), Arsenal Merger Corp. and Eclipsys Corporation (the "Merger Agreement") in exchange for a stock option to acquire 10,000 shares of Eclipsys Corporation common stock for \$16.04 per share. Vests as to 200 shares monthly for sixty (60) months beginning on September 14, 2008.
- (3) Received pursuant to the Merger Agreement in exchange for a stock option to acquire 10,500 shares of Eclipsys Corporation common stock for \$13.98 per share. Vests as to 25% of grant on November 16, 2010 and monthly thereafter for the remainder of the grant.
- (4) Received pursuant to the Merger Agreement in exchange for a stock option to acquire 10,000 shares of Eclipsys Corporation common stock for \$16.04 per share. Options are fully vested as of August 14, 2010.

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.