AEROGEN INC Form SC 13G May 05, 2005

SECURITIES AND EXCHANGE COMMISSION WASHINGTON, DC 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 RULE 13d-2(b)

	Aerogen, Inc.
	(Name of Issuer)
	Common Stock
	(Title of Class of Securities)
	007779309
	(CUSIP Number)
	3–3–05
	(Date of Event Which Requires Filing of this Statement)
Sch	Check the appropriate box to designate the rule pursuant to which this edule is filed:
	_ Rule 13d-1(b)
	X Rule 13d-1(c)
	_ Rule 13d-1(d)
(1)	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.
Act but	The information required in the remainder of this cover page shall not be med to be "filed" for the purpose of Section 18 of the Securities Exchange of 1934 or otherwise subject to the liabilities of that section of the Act shall be subject to all other provisions of the Act (however, see the es).
CUS	IP No. 007779309 13G Page 2 of 12 Page:
1.	NAME OF REPORTING PERSONS I.R.S. IDENTIFICATION NO. OF ABOVE PERSONS (ENTITIES ONLY)
	ProMed Partners, L.P.
2.	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

				(a) x (b) _	
3.	SEC USE O	NLY			
4.	CITIZENSH	IP OF	PLACE OF ORGANIZATION		
	Delaware				
NU	JMBER OF	5.	SOLE VOTING POWER		
S	SHARES		455,480		
BENE	EFICIALLY	6.	SHARED VOTING POWER		
OV	NED BY				
	EACH	7.	SOLE DISPOSITIVE POWER		
RE	EPORTING		455,480		
Ε	PERSON	8.	SHARED DISPOSITIVE POWER		
	WITH				
9.	AGGREGATE	AMOU	NT BENEFICIALLY OWNED BY EACH REPORTING PR	 Erson	
	455 , 480				
10.	CHECK BOX		HE AGGREGATE AMOUNT IN ROW (9) EXCLUDES C	ERTAIN SHARES*	
				1_1	
11.	PERCENT C	F CLA	SS REPRESENTED BY AMOUNT IN ROW 9		
	8.3%				
12.	TYPE OF R	EPORT	'ING PERSON*		
	PN				
			*SEE INSTRUCTIONS BEFORE FILLING OUT!		
CUSI	IP No. 0077	79309	13G	Page 3 of 12 Pages	
1.	NAME OF REPORTING PERSONS I.R.S. IDENTIFICATION NO. OF ABOVE PERSONS (ENTITIES ONLY)				
	ProMed Pa	rtner	s II, L.P.		
2.	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* (a) X (b) _				
3.	SEC USE C	NLY			
	CITIZENCU	TD 0	PLACE OF ORGANIZATION		
+ .	CTTTVEINシH	エエ ひド	C ELACE OF ORGANIZATION		

	Delaware					
NU	MBER OF	5.	SOLE VOTING POWER			
S	HARES		83,986			
BENE	FICIALLY	6.	SHARED VOTING POWER			
OW	NED BY					
	EACH	7.	SOLE DISPOSITIVE POWER			
RE	PORTING		83,986			
Р	ERSON	8.	SHARED DISPOSITIVE POWER			
	WITH					
9.	AGGREGATE	AMOU	NT BENEFICIALLY OWNED BY EACH REPORTING PE	RSON		
10.	CHECK BOX	IF T	HE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CE	 RTAIN SH		_
11.	PERCENT O	F CLA	SS REPRESENTED BY AMOUNT IN ROW 9			
	1.5%					
12.	TYPE OF RI	EPORT	ING PERSON*			
	PN					
			*SEE INSTRUCTIONS BEFORE FILLING OUT!			
CUSI	P No. 0077	79309	13G	Page 4	of 12	Pages
1.			ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES ONL	Y)		
	ProMed Of:	fshor	e Fund, Ltd.			
2.			OPRIATE BOX IF A MEMBER OF A GROUP*	(b)	X _	
3.	SEC USE OI					
4.	CITIZENSH	IP OR	PLACE OF ORGANIZATION			
	British V	irgin	Islands			
NU	MBER OF	5.	SOLE VOTING POWER			
S	HARES		73,564			

BENEF	ICIALLY	6.	SHARED VOTING POWER	
OWN	ED BY			
E	ACH	7.	SOLE DISPOSITIVE POWER	
REP	ORTING		73,564	
PE	RSON	8.	SHARED DISPOSITIVE POWER	
W	ITH			
9.	AGGREGATE	AMOU	NT BENEFICIALLY OWNED BY EACH REPORTING P	ERSON
	73,564			
10.	CHECK BOX	IF T	HE AGGREGATE AMOUNT IN ROW (9) EXCLUDES C	ERTAIN SHARES*
				_
11.	PERCENT O	F CLA	SS REPRESENTED BY AMOUNT IN ROW 9	
	1.3%			
12.	TYPE OF R	EPORT	ING PERSON*	
	CO			
			*SEE INSTRUCTIONS BEFORE FILLING OUT!	
CUSTP				
CODII	No. 0077	79309	13G	Page 5 of 12 Pages
1.	NAME OF R	 EPORT	13G ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES ON	
1.	NAME OF R	 EPORT ENTIF	ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES ON	
1.	NAME OF RI	 EPORT ENTIF nagem	ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES ON	LY)(a) X
1.	NAME OF RII.R.S. IDI	 EPORT ENTIF nagem APPR	ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES ON ent, Inc.	LY)
1.	NAME OF RI	 EPORT ENTIF nagem APPR	ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES ON ent, Inc.	LY)(a) X
1	NAME OF RII.R.S. IDI	EPORT ENTIF nagem APPR	ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES ON ent, Inc.	LY)(a) X
1. 2. 2. 3. 4.	NAME OF RII.R.S. IDI	EPORT ENTIF nagem APPR NLY IP OR	ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES ON ent, Inc. OPRIATE BOX IF A MEMBER OF A GROUP*	(a) X (b) _
1. 2. 2. 3. 4.	NAME OF RI I.R.S. IDI ProMed Man CHECK THE SEC USE OF	EPORT ENTIF nagem APPR NLY IP OR	ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES ON ent, Inc. OPRIATE BOX IF A MEMBER OF A GROUP* PLACE OF ORGANIZATION	(a) X (b) _
1. 2. 2. 3	NAME OF RI I.R.S. IDI ProMed Man CHECK THE SEC USE OF	EPORT ENTIF nagem APPR NLY IP OR etts 5.	ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES ON ent, Inc. OPRIATE BOX IF A MEMBER OF A GROUP* PLACE OF ORGANIZATION	(a) X (b) _
1. 2. 2. 3. 4. NUM	NAME OF RI I.R.S. IDI ProMed Mai CHECK THE SEC USE OF CITIZENSH Massachuse HBER OF	EPORT ENTIF nagem APPR NLY IP OR etts 5.	ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES ON ent, Inc. OPRIATE BOX IF A MEMBER OF A GROUP* PLACE OF ORGANIZATION SOLE VOTING POWER 73,564	(a) X (b) _
1. 2. 3 NUM SH	NAME OF RI I.R.S. IDI ProMed Mai CHECK THE SEC USE OF CITIZENSH Massachuse HBER OF	EPORT ENTIF nagem APPR NLY IP OR etts 5.	ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES ON ent, Inc. OPRIATE BOX IF A MEMBER OF A GROUP* PLACE OF ORGANIZATION SOLE VOTING POWER 73,564 SHARED VOTING POWER	(a) X (b) _
1. 2. 3. NUM SH. BENEF OWN	NAME OF RI I.R.S. IDI ProMed Ma: CHECK THE SEC USE OF CITIZENSH Massachuse BER OF ARES ICIALLY	EPORT ENTIF nagem APPR NLY IP OR etts 5.	ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES ON ent, Inc. OPRIATE BOX IF A MEMBER OF A GROUP* PLACE OF ORGANIZATION SOLE VOTING POWER 73,564	(a) X (b) _

PERSON		. SH	ARED DISPOSITIVE POWER			
WIT	H					
9. AG	GREGATE AN	MOUNT	BENEFICIALLY OWNED BY EACH REPORTING PERSON			
73	,564					
Offshor		td. wh	laims beneficial ownership of shares held by ProMed ich represent the interests of the shareholders of P	roMed		
10. CH	ECK BOX II	F THE	AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*			
				_		
11. PE	RCENT OF (CLASS	REPRESENTED BY AMOUNT IN ROW 9			
1.	1%					
12. TY	PE OF REPO	ORTING	PERSON*			
IA						
		*	SEE INSTRUCTIONS BEFORE FILLING OUT!			
CUSIP N	o. 0077793	309	13G Page 6 of 12	Pages		
	ME OF REPORT		PERSONS TION NO. OF ABOVE PERSONS (ENTITIES ONLY)			
Pr	oMed Asset	t Mana	gement, L.L.C.			
2. CH	ECK THE A	 PPROPR	IATE BOX IF A MEMBER OF A GROUP*			
			(a) X (b) _			
3. SE	C USE ONLY	Y				
4. CI	. CITIZENSHIP OR PLACE OF ORGANIZATION					
Ma	ssachusett	ts 				
NUMBE:	R OF 5	. sc	LE VOTING POWER			
SHAR	ES 	53	9,466			
BENEFIC	IALLY 6	. SH	ARED VOTING POWER			
OWNED	ВҮ					
EAC	H 7	. sc	LE DISPOSITIVE POWER			
REPOR	ΓING	53	9,466			
	 ON 8		ARED DISPOSITIVE POWER			

	WITH			
9.	AGGREGATI	E AMOU	NT BENEFICIALLY OWNED BY EACH REPORTING	PERSON
	539,466			
Part	ners, L.P.	. and	isclaims beneficial ownership of shares ProMed Partners II, L.P. which represent hese entities.)	_
10.	CHECK BOX	K IF T	HE AGGREGATE AMOUNT IN ROW (9) EXCLUDES	CERTAIN SHARES*
				1_1
11.	PERCENT (OF CLA	SS REPRESENTED BY AMOUNT IN ROW 9	
	9.8%			
12.	TYPE OF I	REPORT	ING PERSON*	
	IA			
			*SEE INSTRUCTIONS BEFORE FILLING OUT!	
CUSI	IP No. 007	779309	13G	Page 7 of 12 Pages
1.			ING PERSONS ICATION NO. OF ABOVE PERSONS (ENTITIES O	NLY)
	David B.	Muske	t	
2.	CHECK THE	E APPR	OPRIATE BOX IF A MEMBER OF A GROUP*	(a) X (b) _
3.	SEC USE (ONLY		
4.	CITIZENSE	HIP OR	PLACE OF ORGANIZATION	
	United St	tates		
NU	JMBER OF	5.	SOLE VOTING POWER	
S	SHARES		120,942	
BENE	CFICIALLY	6.	SHARED VOTING POWER	
OW	NED BY			
	EACH		SOLE DISPOSITIVE POWER	
RE	PORTING		120,942	
P	PERSON	8.	SHARED DISPOSITIVE POWER	
	WITH		613,030	

9. AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

733,972

614,563

(Reporting person disclaims beneficial ownership of shares held by ProMed Partners, L.P. and ProMed Partners II, L.P. which represent the interests of other partners of these entities.) 10. CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 11. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 ______ 12. TYPE OF REPORTING PERSON* *SEE INSTRUCTIONS BEFORE FILLING OUT! CUSIP No. 007779309 13G Page 8 of 12 Pages ______ 1. NAME OF REPORTING PERSONS I.R.S. IDENTIFICATION NO. OF ABOVE PERSONS (ENTITIES ONLY) Barry Kurokawa 2. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* (a) |X| (b) |_| _____ 3. SEC USE ONLY 4. CITIZENSHIP OR PLACE OF ORGANIZATION United States NUMBER OF 5. SOLE VOTING POWER SHARES 1,533 ______ BENEFICIALLY 6. SHARED VOTING POWER OWNED BY 613,030 ______ 7. SOLE DISPOSITIVE POWER 1,533 _____ PERSON 8. SHARED DISPOSITIVE POWER WITH 613,030 -----9. AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

(Reporting person disclaims beneficial ownership of shares held by ProMed Partners, L.P. and ProMed Partners II, L.P. which represent the interests of other partners of these entities.) ______ 10. CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* ______ 11. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11.2% 12. TYPE OF REPORTING PERSON* IA *SEE INSTRUCTIONS BEFORE FILLING OUT! 13G CUSIP No. 007779309 Page 9 of 12 Pages Item 1(a). Name of Issuer: AEROGEN INC ______ Item 1(b). Address of Issuer's Principal Executive Offices: 2071 Stierlin Court Suite 100 Mt. View, CA 94043 Item 2(a). Name of Person Filing: ProMed Partners, L.P., ProMed Partners II, L.P., ProMed Offshore Fund, Ltd., ProMed Offshore Fund II, Ltd., ProMed Management, Inc., and ProMed Asset Management, L.L.C., David B. Musket and Barry Kurokawa Item 2(b). Address of Principal Business Office, or if None, Residence: 125 Cambridgepark Drive, Cambridge, MA 02140 Item 2(c). Citizenship: See pages 2,3,4,5 and 6-----Item 2(d). Title of Class of Securities: Common Stock ______

Item 2(e). CUSIP Number:

8

718928104

- Item 3. If This Statement is Filed Pursuant to Rule 13d-1(b), or 13d-2(b) or (c), Check Whether the Person Filing is a:
 - (a) |_| Broker or dealer registered under Section 15 of the Exchange Act.
 - (b) |_| Bank as defined in Section 3(a)(6) of the Exchange Act.
 - (c) |_| Insurance company as defined in Section 3(a)(19) of the Exchange Act.
 - (d) |_| Investment company registered under Section 8 of the Investment Company Act.
 - (e) |_| An investment adviser in accordance with Rule 13d-1(b)(1)(ii)(E);
 - (f) |_| An employee benefit plan or endowment fund in accordance with Rule 13d-1(b)(1)(ii)(F);
 - (g) |_| A parent holding company or control person in accordance with Rule 13d-1(b)(1)(ii)(G);

 - (i) |_| A church plan that is excluded from the definition of an investment company under Section 3(c)(14) of the Investment Company Act;
 - (j) $|_|$ Group, in accordance with Rule 13d-1(b)(1)(ii)(J).

If this statement is filed pursuant to Rule 13d-1(c), check this box |X|

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Item 4. Ownership.

Provide the following information regarding the aggregate number and percentage of the class of securities of the issuer identified in Item 1.

(a) Amount beneficially owned:

See pages 2,3,4,5 and 6

(b) Percent of class:

See pages 2,3,4,5 and 6

- (c) Number of shares as to which such person has:
 - (i) Sole power to vote or to direct the vote

 See pages 2,3,4,5 and 6
 - (ii) Shared power to vote or to direct the vote

See pages 2,3,4,5 and 6

- (iii) Sole power to dispose or to direct the disposition of See pages 2,3,4,5 and 6
- (iv) Shared power to dispose or to direct the disposition of See pages 2,3,4,5 and 6

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

Not Applicable

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.

See "Exhibit A" attached hereto and pages 2, 3, 4, 5 and 6

Item 9. Notice of Dissolution of Group.

Not Applicable

Item 10. Certifications.

(a) The following certification shall be included if the statement is filed pursuant to Rule 13d-1 (b):

"By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and 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 such purpose or effect."

(b) The following certification shall be included if the statement is filed pursuant to Rule 13d-1(c):

"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 such purpose or effect."

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CUSIP No. 007779309

EXHIBIT A

JOINT FILING AGREEMENT

ProMed Partners, L.P., ProMed Partners II, L.P., ProMed Offshore Fund, Ltd., ProMed Management, Inc. and ProMed Asset Management, L.L.C. each hereby agrees that the Schedule 13G to which this Exhibit is attached and any amendments thereto relating to the acquisition of shares of Common Stock of Longport, Inc. is filed jointly on behalf of each such person.

Dated: 3/3/05

PROMED PARTNERS, L.P.

By: ProMed Asset Management, L.L.C. its General Partner

By: DBM Corporate Consulting Group, Ltd. a Managing Member

By: /s/ David B. Musket

Name: David B. Musket
Title: President

PROMED PARTNERS II, L.P.

By: ProMed Asset Management, L.L.C. its General Partner

By: DBM Corporate Consulting Group, Ltd. a Managing Member

By: /s/ David B. Musket

Name: David B. Musket Title: President

PROMED OFFSHORE FUND, LTD.

By: /s/ David B. Musket

Name: David B. Musket Title: Director

PROMED MANAGEMENT, INC.

By: /s/ David B. Musket

Name: David B. Musket
Title: President

PROMED ASSET MANAGEMENT, L.L.C.

By: DBM Corporate Consulting Group, Ltd. a Managing Member

By: /s/ David B. Musket

Name: David B. Musket Title: President

Page 12 of 12 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.

3/3/05 -----(Date)

/s/ David B. Musket -----(Signature)

David B. Musket,
President of Managing Member
of the General Partner

(27 / 7)

(Name/Title)

David B. Musket

By: /s/ David B. Musket

David B. Musket

Barry Kurokawa

By: /s/ Barry Kurokawa
Barry Kurokawa

Note. Schedules filed in paper format shall include a signed original and five copies of the schedule, including all exhibits. See Rule 13d-7 (b) for other parties for whom copies are to be sent.

Attention. Intentional misstatements or omissions of fact constitute federal criminal violations (see 18 U.S.C. 1001).