### FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasnington,	D.C.	20548

washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-		
	Estimated average burden			

3235-0287 Estimated average burden hours per response: 0.5

# Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

1. Name and Address of Reporting Person* FORMICA P MICHAEL						2. Issuer Name and Ticker or Trading Symbol ORASURE TECHNOLOGIES INC OSUR									Check al	l applicable Director Officer (giv	e)		Owner (specify
(Last) (First) (Middle) 220 EAST FIRST STREET					3. Date of Earliest Transaction (Month/Day/Year) 02/01/2009									1	cxec. VP	& GM	Cryo. Sys. 1	<b>'</b>	
(Street) BETHLE (City)			18015 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ine) X	,			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Date		n Date,	Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			nd Se Be	Amount of ecurities eneficially wned Follo	F	6. Ownership Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v			(A) or (D)	Price	,  Tr	ansaction( nstr. 3 and			(111511.4)
Common Stock			02/01	1/2009		02/02	/2009	F <sup>(1)</sup>		5,148		D \$2.95		95	150,167		D		
		Ta	able II - I )								sed of, onvertib				y Owr	ied			
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercise Price of Derivative Security		Execution if any	Execution Date, f any		4. Transaction Code (Instr. 8)		of I		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price Derivat Securit (Instr. 5	y Secur Secur Bene Owne Follor Repo	rities ficially ed wing orted saction(s	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V		(A)	(D)	Date Exercisal		Expiration Date	Title	or Nun of	nber					

### **Explanation of Responses:**

1. Withholding of shares to pay the tax liability associated with vesting of restricted shares.

#### Remarks:

Mark L. Kuna, as Attorney-In-Fact for P. Michael Formica, (Power of Attorney previously

02/04/2009

filed)

\*\* 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.