FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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(h) of the Investment Company Act of 1940

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 0.5 hours per response:

1. Name and Addr	ess of Reporting Pe MICHAEL	erson*	2. Issuer Name and Ticker or Trading Symbol <u>SCHEIN HENRY INC</u> [HSIC]		tionship of Reporting Pe all applicable) Director	rson(s) to Issuer 10% Owner				
				X	Officer (give title	Other (specify below)				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)		below)	,				
C/O HENRY S	CHEIN, INC.		02/18/2004		President of Medical Group					
135 DURYEA	ROAD									
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	6. Individual or Joint/Group Filing (Check Applicable					
(Street)					Form filed by One De	arting Dereen				
MELVILLE	NY	11747		X	Form filed by One Rep	borting Person				
·					Form filed by More that Person	an One Reporting				
(City)	(State)	(Zip)								

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Of (D) (Instr. 3, 4 and 5) Code (Instr.		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
		Code V Amount (A) or (D) Price		Price	Transaction(s) (Instr. 3 and 4)		(11301.4)			
Common Stock	03/10/2004		М		23,470	Α	\$28.625	23,470	D	
Common Stock	03/10/2004		S		18,470	D	\$72.4	5,000	D	
Common Stock	03/10/2004		S		5,000	D	\$72.41	0	D	

	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)														
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Stock Option (Right to buy) ⁽¹⁾	\$70.98	02/18/2004		A		25,000		(2)	02/18/2014	Common Stock	25,000	\$0	25,000	D	
Stock Option (Right to buy) ⁽¹⁾	\$ 28.625	03/10/2004		М			23,470	(3)	03/01/2011	Common Stock	23,470	\$0	44,030	D	

Explanation of Responses:

1. Acquired pursuant to the Issuer's 1994 Stock Option Plan.

2. Pursuant to the terms of the stock option agreement between the Issuer and the Reporting Person, the option becomes exercisable in four (4) equal annual installments beginning on the first (1st) anniversary of the grant date specified in Column 3.

3. The option vested in three equal installments on March 1, 2002, March 1, 2003 and March 1, 2004.

/s/ Michael Racioppi

** Signature of Reporting Person

03/12/2004

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.