## INTEGRAMED AMERICA INC Form 4 June 05, 2002 1. Name and Address of Reporting Person Liebler, Sarason IntegraMed America, Inc. One Manhattanville Road Purchase, NY 10577-2100 2. Issuer Name and Ticker or Trading Symbol IntegraMed America, Inc. (INMD) 3. IRS or Social Security Number of Reporting Person (Voluntary) 4. Statement for Month/Year 5/2002 5. If Amendment, Date of Original (Month/Day/Year) 6. Relationship of Reporting Person(s) to Issuer (Check all applicable) (X) Director ( ) 10% Owner () Officer (give title below) () Other (specify below) 7. Individual or Joint/Group Filing (Check Applicable Line) (X) Form filed by One Reporting Person

( ) Form filed by More than One Reporting Person

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

+	+		-+			+				+	
1. Title of Security 	2. 	Trans- action	Ì	action		<pre> 4. Securities Acquired (A)   or Disposed of (D)</pre>				5. 	Amou Secu
		Date		Code		 					Bene Owne
	1	(Month/								1	End
	1	Day/	+			+		+	+	-+	Mont
		Year)	Cod		V		ount	A/D	Price		
+	-+		-+			+		+	+	+	

Common Stock

05/21/2002 J