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	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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* FROST PHILLIP MD ET AL						2. Issuer Name and Ticker or Trading Symbol SafeStitch Medical, Inc. [SFES.OB]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner					
(Last) (First) (Middle) 4400 BISCAYNE BLVD						3. Date of Earliest Transaction (Month/Day/Year) 02/17/2010									Officer below)	(give title		Other (s	specify	
(Street) MIAMI FL 33137 (City) (State) (Zip)					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	ole I - Non-	-Deriva	ative	e Se	curities	s Ac	quired,	Dis	posed o	of, or Be	nefi	cially	Owned					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date			Transaction Code (Instr. r) 8)		5) (4) or			5. Amour Securitie Beneficia Owned F Reported Transact (Instr. 3 a	s Forn (D) o ollowing (I) (Ir ion(s)		n: Direct r Indirect estr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
	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 Da if any (Month/Day/Y	C	ransaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Ex Expiration (Month/Da	Date	•	of Securities			8. Price of Derivative Security (Instr. 5)		e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				C	ode	v	(A)	(D)	Date Exercisab		Expiration Date	Title	or	ount nber res						
Stock Option (Right to Buy)	\$1.2	02/17/2010			A		50,000		02/17/201	.0	02/17/2017	Common Stock	50,	000	\$0.00	50,000	0	D		

Explanation of Responses:

Remarks:

/s/ Phillip Frost, M.D.

02/18/2010

** 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.