FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	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).

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

1. Name ar	ALL	2. Issuer Name and Ticker or Trading Symbol ALLSCRIPTS-MISYS HEALTHCARE SOLUTIONS, INC. [MDRX]									heck a	tionship of Reporting I all applicable) Director Officer (give title below) Executive VP, Hur		10%	Issuer Owner (specify				
(Last) (First) (Middle) 222 MERCHANDISE MART PLAZA						3. Date of Earliest Transaction (Month/Day/Year) 07/31/2010									X	belov	v)		
SUITE 2024						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) CHICAG	O IL	6	0654												X		filed by Mor	e Reporting Pe e than One Re	
(City)	(Sta	ate) (Z	Zip)																
		Table	e I - N	on-Deriv	ative S	ecu	ıritie	s Acq	uired, D	isp	osed o	f, or	Bene	ficia	illy C	Owne	d		
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr. and 5)						3, 4 Secu		ially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v			(A) or (D)	Price	Repor			(111341 . 4)	(111341. 4)
Common Stock 07/31/2						2010			A ⁽¹⁾		16,29	8	A	\$0		32,357		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)	vative Conversion Date Execution Date urity or Exercise (Month/Day/Year) if any		ion Date,	4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo	r osed) r. 3, 4	6. Date Ex Expiration (Month/Da	Date by/Yes	e ar) xpiration	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amount or Numb of Title Share:		ount nber	t		Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

 $1.\ Vesting\ of\ performance-based\ restricted\ stock\ unit\ award\ granted\ on\ July\ 31,\ 2009.$

<u>Kathie Kittner for Diane</u> <u>Adams by Power of Attorney</u>

08/19/2010

** 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.