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 7								
1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol PEDIATRIX MEDICAL GROUP INC								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
CARLO WALDEMAR A						PDX								X Directo	r		10% Ow	ner	
					- [**	1									Officer (give title		Other (specify		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)								below)	below)		below)		
1301 CONCORD TERRACE					05	05/06/2005													
(Street)				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
SUNRIS	E FL		33323-2825											X Form fi	led by One	Repor	rting Persor		
															filed by More than One Reporting			ing	
(City)		tate)	(Zip)											Person					
		Tal	ole I - Non	-Deriv	vativ	- Sa	curities	Δ.ς.	nuired I	Die	nosed of	f or Bor	oficial	v Owned					
4 Till64	2		JIC 1 - IVOI				2A. Deeme		3.	J13	1			-		C 0	a a wa baina 📗 🗦	Noture of	
1. Title of Security (Instr. 3) 2. Transa Date (Month/Date)					ear)	Execution Date, if any (Month/Day/Year		Transaction Disposed Code (Instr. 5)			ies Acquired (A) or Of (D) (Instr. 3, 4 a		5. Amour Securitie Beneficia Owned F	s Formally (D) ollowing (I) (I		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount (A) or (D)		Price	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)	
			Table II - I (osed of, onvertib			Owned				*	
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)		4. Transaction Code (Instr. 8)				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 Transaction(s)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v			Date Exercisab			Title	Amount or Number of Shares		(Instr. 4)				
Stock Options (Right to	\$74.6	05/06/2005			A		4,000 ⁽¹⁾		05/06/200	15	05/06/2015	Common Stock	4,000	\$0	4,000		D		

Explanation of Responses:

1. Options granted pursuant to the Company's Amended and Restated Stock Option Plan .

BY: THOMAS W. HAWKINS 05/10/2005

** 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.