FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					0	r Sec	ction 30	(h) of the	Investme	ent Co	mpany Act c	of 1940							
1. Name and Address of Reporting Person* <u>CARLYLE JOHN K</u>							2. Issuer Name and Ticker or Trading Symbol PEDIATRIX MEDICAL GROUP INC								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 1301 CONCORD TERRACE						PDX] 3. Date of Earliest Transaction (Month/Day/Year) 05/21/2004									Officer (give title Other (specify below) below)				
(Street) SUNRISE FL 33323-2825				825	4.	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual Cine) X									ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting				
(City) (State) (Zip)						Form filed by More than One Reporting Person													
		Tal	ble I - No	on-Der	ivativ	re S	ecuri	ties Ac	quired	l, Dis	sposed of	f, or Bei	neficia	ally Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)						ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5) Secu Bend Own	nount of Irities eficially ed Following	Forn (D) c	n: Direct or Indirect nstr. 4) (7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) or (D) Price		Tran	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock				05/21/2004			05/2	M		5,000	A	\$ <mark>27.</mark>	22	5,000		D			
Common Stock				05/21/2004		1	05/21/2004		M		400	A	\$38.	91	5,400	,400			
Common Stock				05/21/2004		1	05/21/2004		S		5,400	D	\$63.7	666	0	0			
Common Stock				05/2	05/24/2004		05/24/2004		М		2,600	A	\$38.91		2,600	2,600			
Common Stock				05/2	05/24/2004		05/24/2004		М		4,000	A	\$37.	55	6,600		D		
Common Stock 05/2				1/2004		05/24/2004		S		6,600	D	\$64.0	454	0		D			
			Table II								osed of, convertib				d	,			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	n Date,		Transaction Code (Instr				Exercion Da IDay/Y		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price Derivat Securit (Instr. 5	ve derivati y Securiti) Benefic Owned Followii Reporte	ve ies ially ng ed	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amour or Number of Shares	er	Transac (Instr. 4				
Stock Options (Right to buy)	\$37.55	05/24/2004	05/24/2004		M			4,000 ⁽¹⁾	06/04/2	2003	06/04/2013	Common Stock	4,000	0 \$0	0)	D		
Stock Options (Right to buy)	\$38.91	05/21/2004	05/21/2004		М		400 ⁽¹⁾		05/14/2	2003	05/14/2012	Common Stock	400	\$0	2,6	00	D		
Stock Options (Right to buy)	\$38.91	05/24/2004	05/24/2004		М		2,600 ⁽¹⁾		05/14/2	2003	05/14/2012	Common Stock 2,		0 \$0	0	0			
Stock Option	\$27.22	05/21/2004	05/21/2004		M	М		5,000 ⁽¹⁾	05/16/2	2002	05/16/2011	Common Stock	5,000	0 \$0	o)	D		

Explanation of Responses:

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

THOMAS W. HAWKINS

05/24/2004

** 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.