

PATOU GARY
Form 4
February 28, 2005

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 Instruction
1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF
SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

OMB APPROVAL

OMB
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(Print or Type Responses)

1. Name and Address of Reporting Person *
PATOU GARY

2. Issuer Name **and** Ticker or Trading
Symbol
OSCIENT PHARMACEUTICALS
CORP [OSCI]

5. Relationship of Reporting Person(s) to
Issuer

(Check all applicable)

(Last) (First) (Middle)
1000 WINTER ST.
(Street)

3. Date of Earliest Transaction
(Month/Day/Year)
02/24/2005

____ Director ____ 10% Owner
X Officer (give title below) ____ Other (specify below)
Chief Medical Officer

WALTHAM, MA 02451

4. If Amendment, Date Original
Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check
Applicable Line)
X Form filed by One Reporting Person
____ Form filed by More than One Reporting
Person

(City) (State) (Zip)

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
Common Stock ⁽¹⁾	02/24/2005		M	V Amount (A) or (D) Price 22,222 A \$ 0.07	389,681	D	
Common Stock ⁽¹⁾	02/24/2005		S	20,000 D \$ 2.98	369,681	D	
Common Stock ⁽¹⁾	02/25/2005		M	22,222 A \$ 0.07	391,903	D	
Common Stock ⁽¹⁾	02/25/2005		S	20,000 D \$ 3.08	371,903	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
PATOU GARY 1000 WINTER ST. WALTHAM, MA 02451			Chief Medical Officer	

Date _____

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.