## FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box if no longer subject to

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

**OMB APPROVAL** 3235-0287 Estimated average burden 0.5 hours per response

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     ENRIGHT PATRICK G						2. Issuer Name and Ticker or Trading Symbol  JAZZ PHARMACEUTICALS INC [ JAZZ ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last)						3. Date of Earliest Transaction (Month/Day/Year) 07/07/2009									X Director 10% Owner Officer (give title below) Other (specify below)				(specify	
800 EL CAMINO REAL, SUITE 220															Individual or Joint/Group Filing (Check Applicable					
(Street)												Line)  X Form filed by One Reporting Person								
MENLO PARK CA 94025					_										Form fil Person	ed by Mo	ore than	One Rep	orting	
(City)	(5	state)	(Zip)																	
		Та	ble I - N	on-De	rivativ	ve S	ecurities	s Ac	quired	l, Di	sposed o	f, or Be	nefic	ially	Owned					
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (I 8)			rities Acquired (A) or ed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct Inc (D) or Indirect Be (I) (Instr. 4) Ov		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D) Price		е					(Instr. 4)	
Common Stock 07/07/2					7/2009	009			A		1,858,48	6 A	\$3	.63	1,858,	,486		I	By Longitude Venture Partners, L.P. <sup>(1)</sup>	
Common Stock 07/07/2					7/2009	009		A		37,248	A	\$3	.63	37,248		I Ca		By Longitude Capital Associates, L.P. <sup>(1)</sup>		
			Table II								posed of, converti				Owned					
1. Title of Derivative Security (Instr. 3)	Conversion Date Executi or Exercise (Month/Day/Year) if any			emed 4. ion Date, Tra		action Instr.	5. Number of Derivative		6. Date Exerci Expiration Da (Month/Day/Yo		isable and te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		unt	8. Price of Derivative Security (Instr. 5)	9. Numb derivati Securiti Benefic Owned Followin Reporte	ve les ially ng	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amou or Numb of Sha	er		Transaction(s) (Instr. 4)				
Warrant (right to buy)	\$4	07/07/2009		A		929,243		(2)		07/07/2016	Common Stock	929,	243	\$0.0625	929,	243	I	By Longitude Venture Partners, L.P. <sup>(1)</sup>		
Warrant (right to buy)	\$4	07/07/2009			A	18,624		(2)		07/07/2016	Common Stock	18,6	524	\$0.0625	18,6	624 I		By Longitude Capital Associates, L.P. <sup>(1)</sup>		
Option (right to buy)	\$3.63	07/07/2009			A	30,000			(3)		07/07/2019	Common Stock	30,0	000	\$0	30,0	000 D			

## **Explanation of Responses:**

- 1. Patrick G. Enright is a managing member of Longitude Capital Partners, LLC ("Longitude Capital"), the sole general partner of each of Longitude Venture Partners, L.P. and Longitude Capital Associates, L.P. Mr. Enright disclaims beneficial ownership of the securities of the Issuer held by Longitude Capital, except to the extent of his pecuniary interest therein.
- 2. Exercisable immediately.
- 3. One-third of the option shares shall vest on July 7, 2010 and the balance of the option shares shall vest in a series of twenty-four (24) successive equal monthly installments thereafter.

## Remarks:

/s/ Peter Soparkar, attorney-in-

07/09/2009

fact

\*\* 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.