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).
--	--

Common Stock, par value \$.0001 per

share

04/04/2008

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

OMB APPR	OVAL
OMB Number:	3235-0287
Estimated average bur	den
hours per response:	0.5

See Footnotes⁽¹⁾

(2)(3)(4)

I(1)(2)(3)(4)

				01 Section 30(11) 01		esune	in Company i	ACI UI 13	940			
1. Name and Address of Reporting Person* BRIDGER MANAGEMENT LLC				2. Issuer Name and Ticker or Trading Symbol <u>JAZZ PHARMACEUTICALS INC</u> [JAZZ]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner			
(Last) 90 PARK AVEN 40TH FLOOR	(First) NUE	(Midc		3. Date of Earliest Transaction (Month/Day/Year) 04/04/2008			- Office below	r (give title)	Other (specify below)			
(Street) NEW YORK	NY (State)	1001 (Zip)					Line) Form	filed by One Rep filed by More tha	•			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8) Code		4. Securities Disposed Of 5) Amount			5. Amount of Securities Beneficially Owned Followir Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect g (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

1,500

Α

\$8.74

2,616,778

Р

			(5-, 1-	, .	,		,				·····,												
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. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed . 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		Expiration Date		Expiration Date		Expiration Date		Expiration Date Amount of (Month/Day/Year) Securities Underlying Derivative		Expiration Date Amount of Security Month/Day/Year) Securities Security Underlying Derivative Security (Instr. 5)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares												

	s of Reporting Persor	
(Last)	(First)	(Middle)
90 PARK AVEN	UE	
40TH FLOOR		
(Street)		
NEW YORK	NY	10016
(City)	(State)	(Zip)
1. Name and Addres <u>MIGNONE</u>	s of Reporting Persor	1
(Last)	(First)	(Middle)
90 PARK AVEN	UE	
40TH FLOOR		
(Street) NEW YORK	NY	10016
(City)	(State)	(Zip)
1. Name and Addres BRIDGER C.	s of Reporting Persor	* 1

(Last)	(First)	(Middle)
1		

90 PARK AVENU 40TH FLOOR	Е	
(Street) NEW YORK	NY	10016
(City)	(State)	(Zip)
1. Name and Address <u>SWIFTCURRI</u>	of Reporting Person [*] ENT PARTNERS	
(Last) 90 PARK AVENU 40TH FLOOR	(First) E	(Middle)
(Street) NEW YORK	NY	10016
(City)	(State)	(Zip)
1. Name and Address <u>SWIFTCURRE</u>	of Reporting Person [*] ENT OFFSHORE	LTD
(Last) 90 PARK AVENU 40TH FLOOR	(First) E	(Middle)
(Street) NEW YORK	NY	10016
(City)	(State)	(Zip)

Explanation of Responses:

1. The shares of the Issuer's Common Stock, par value \$.0001 per share (the "Shares") reported herein as indirectly beneficially owned by Bridger Management, LLC ("Bridger" or "Investment Manager") are directly beneficially owned by Swiftcurrent Partners, L.P. and Swiftcurrent Offshore, Ltd., over which Bridger shares investment control. For such reason, Bridger may be deemed to beneficially own such securities for purposes of Section 16 of the Securities Exchange Act of 1934, as amended ("Section 16").

2. The Shares reported herein as indirectly beneficially owned by Roberto Mignone ("Mr. Mignone") are directly beneficially owned by Swiftcurrent Partners, L.P. and Swiftcurrent Offshore, Ltd., over which Mr. Mignone shares investment control. For such reason, Mr. Mignone may be deemed to beneficially own such securities for purposes of Section 16.

3. The Shares reported herein as indirectly beneficially owned by Bridger Capital, LLC are directly beneficially owned by Swiftcurrent Partners, L.P. of which Bridger Capital, LLC is the General Partner. For such reason, Bridger Capital, LLC may be deemed to beneficially own such securities for purposes of Section 16.

4. Each reporting person and entity named herein disclaims beneficial ownership of the reported securities except to the extent of his or its pecuniary interest therein and this report shall not be deemed an admission that the reporting person or any entity named herein is the beneficial owner of the securities for purposes of Section 16, or for any other purpose.

Bridger Management, LLC By: /s/ Roberto Mignone, Managing Member	04/08/2008
<u>/s/ Roberto Mignone</u>	04/08/2008
Bridger Capital, LLC By: /s/ Roberto Mignone, Managing Member	<u>04/08/2008</u>
Swiftcurrent Partners, L.P. By: /s/ Roberto Mignone, Managing Member of General Partner	<u>04/08/2008</u>
Swiftcurrent Offshore, Ltd. By: /s/ Roberto Mignone, Managing Member of Investment Manager	04/08/2008

** 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.