SEC Form 4	
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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

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 APPROVAL										
OMB Number:	3235-0287									
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hours per response:	0.5

1. Name and Addr Reed Dougl	ess of Reporting Pe as MD	erson [*]	2. Issuer Name and Ticker or Trading Symbol <u>DIGIRAD CORP</u> [DRAD]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner
	ast) (First) (Middle) C/O VECTOR FUND MANAGEMENT 751 LAKE COOK ROAD, SUITE 350		3. Date of Earliest Transaction (Month/Day/Year) 02/12/2008	Officer (give title Other (specify below) below)
1751 LAKE CO	JOK ROAD, SU	JITE 350	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)
(Street) DEERFIELD	IL	60015		X Form filed by One Reporting Person Form filed by More than One Reporting Person
(City)	(State)	(Zip)	_	r cison

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. Transa Code (8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D) Price		Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	02/12/2008		J ⁽¹⁾		890,771	D	\$0.00	319,412	I	By Vector Later- Stage Equity Fund II (QP), L.P. ⁽²⁾
Common Stock	02/12/2008		J ⁽¹⁾		296,923	D	\$0.00	22,489	I	By Vector Later- Stage Equity Fund II, L.P. ⁽²⁾
Common Stock	02/12/2008		J ⁽¹⁾		1,257	A	\$0.00	23,746	D	

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

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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	6. Date Exerc Expiration Da (Month/Day/Y	7. Title Amour Securi Under Deriva Securi and 4)	nt of ties lying tive ty (Instr. 3	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				

Explanation of Responses:

1. Vector Fund Management, L.P. distributed the shares to its limited partners on a pro rata basis. Reporting Person is a limited partner of Vector Fund Management, L.P.

2. Reporting Person is a managing director of Vector Fund Management, L.P., which is the general partner of Vector Later-Stage Equity Fund II, L.P. and Vector Later-Stage Equity Fund II (QP), L.P. Reporting Person disclaims beneficial ownership of the shares held by Vector Later-Stage Equity Fund II, L.P. and Vector Later-Stage Equity Fund II (QP), L.P. Reporting Person disclaims beneficial ownership of the shares held by Vector Later-Stage Equity Fund II, L.P. and Vector Later-Stage Equity Fund II (QP), L.P. with the other managing director of Vector Fund Management, L.P.

<u>Douglas Reed, MD</u>

02/14/2008

Date

** Signature of Reporting Person

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.