FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-0287 Estimated average burden

0.5

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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

1. Name and Address of Reporting Person* Faulkner Robert C.						2. Issuer Name and Ticker or Trading Symbol MedAvail Holdings, Inc. [MDVL]									all app Direc	tor	ng Pei	10% O	wner
(Last)	`	(First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/02/2024										below	er (give title v)		Other (sbelow)	specify
C/O REDMILE GROUP, LLC ONE LETTERMAN						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
DRIVE, BUILDING D SUITE D3-300														X	, , ,				
(Chrosh)															Form filed by More than One Reporting Person				
(Street) SAN FRANCISCO CA 94129				Rule 10b5-1(c) Transaction Indication															
(City)		ate) (Z	Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Exec if an	Deemed cution Date, y nth/Day/Year)				es Acquired (A) Of (D) (Instr. 3, 4		and Securit Benefic Owned		ties cially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or Pri	ce	Transa	teported ransaction(s) nstr. 3 and 4)			(Instr. 4)
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	on Date,		Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisab Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly OF DO (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amoun or Numbe of Shares	r					

Explanation of Responses:

Remarks:

Rob Faulkner, a member of the board of directors of the Issuer and a managing director of Redmile, was elected to the board of the Issuer as a representative of Redmile and its affiliates. Effective as of February 2, 2024, Mr. Faulkner resigned from his position as a member of the Issuer's board of directors prior to the Issuer's filing of a voluntary petition for relief under the provisions of Chapter 7 of Title 11 of the United States Code in the U.S. Bankruptey Court for the District of Delaware. As a result of Mr. Faulkner's resignation, Redmile and Mr. Green have also ceased to be directors by deputization for purposes of Section 16 of the Securities Exchange Act of 1934, as amended.

/s/ Robert C. Faulkner

02/06/2024

** 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.