# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OIVIB APPROV	AL
OMB Number:	3235-0287
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hours per response	0.5

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 or Section 30(h) of the Investment Company Act of 1940

(Print or Typ	be Responses	/													
1. Name and Address of Reporting Person *- Rainville Philippe					2. Issuer Name and Ticker or Trading Symbol VisualMED Clinical Solutions Corp. [VMCS]					1	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)Director10% Owner				
(Last) (First) (Middle) 391A LAURIER WEST				3. Date of Earliest Transaction (Month/Day/Year) 10/27/2004					X	X Officer (give title below) Other (specify below)  CFO					
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)					_X_ Fo	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person					
MONTREAL, A8 H2V 2K3 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqu					Acquired, I	uired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year			2A. Deemed Execution Date, i r) any (Month/Day/Year		ate, if	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		d 5. Amount of Securities Be		neficially	6. 7. Ownership Form: B	. Nature f Indirect eneficial wnership	
					•		Cod	le V An	(A) or (D)	Price			(	or Indirect (I I) Instr. 4)	Instr. 4)
Reminder: F	Report on a se	sparace mile for each							who respond						474 (9-02)
Reminder: F	Report on a se	parate into 100 quen	Table II					in this fo a current uired, Dispose	rm are not re ly valid OMB	quired to re control nu icially Owne	espond u mber.				474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion	3. Transaction	3A. Deemed Execution Date, if	4. Transac Code	tion of S	5. Numb of Derive Securities Acquired or Dispo of (D) (Instr. 3,	rants er ative es d (A) sed	in this fo a current uired, Dispose	rm are not re rly valid OMB ed of, or Beneficertible securit isable and te	quired to re control nu icially Owne	espond umber.  d  Amount	8. Price of	9. Number o Derivative Securities Beneficially Owned Following Reported	f 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur p of Indire Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	3A. Deemed Execution Date, if any	4. Transac Code	tion of S	5. Numb of Derive Securities Acquired or Dispo	er ative es d (A) sed 4,	in this fo a current uired, Dispose options, com 6. Date Exerci Expiration Da	rm are not re rly valid OMB ed of, or Beneficertible securit isable and te	cially Owne ies) 7. Title and of Underlyi Securities	espond umber.  d  Amount	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following	f 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natu p of Indire Benefici Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	3A. Deemed Execution Date, if any	(e.g., pu 4. Transac Code (Instr. 8	tition S S S S S S S S S S S S S S S S S S S	alls, war 55. Numb of Deriving Securities Acquired or Dispo of (D) (Instr. 3, and 5)	rants.  per attive es d (A) sed 4, (D)	in this fo a current uired, Dispose options, conv 6. Date Exerc: Expiration Da (Month/Day/Y	rm are not re elly valid OMB ed of, or Benefi vertible securit isable and te Vear)	quired to recontrol nuicially Owneries) 7. Title and of Underlyi Securities (Instr. 3 and	Amount or Number of	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur p of Indire Beneficia Ownersh (Instr. 4)

#### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Rainville Philippe 391A LAURIER WEST MONTREAL, A8 H2V 2K3			CFO		

### **Signatures**

/s/ Philippe Rainville	04/12/2005
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- $\star$  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.

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.