FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIA	L OWNERSHIP

l	UNID APPRO	VAL						
l	OMB Number:	3235-0287						
l	Estimated average burden							
l	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).

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* RICHMAN ERIC I				2. Issuer Name and Ticker or Trading Symbol HEALTHCARE ACQUISITION CORP [PIP								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
											rir		Director			10% Ov	vner	
(1 - a) (Figs) (Atidals)													X	X Officer (give title below)			Other (specify below)	
(Last) (First) (Middle)				Date of Earliest Transaction (Month/Day/Year)									Sr. VP, Business Development			t		
C/O PHARMATHENE, INC.					10/02/2007													
ONE PARK PLACE, SUITE 450				ŀ	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)					4. II AIII	enument, i	Date 0	i Originai i	iieu (INIOHHI/D6	ly/ rear)		Line)	vidual of 30	iiii Group	i illing ((Спеск Арр	ilicable
ANNAP	OLIS N	MD	21401										X	Form file	ed by One	Repor	rting Persor	1
														Form filed by More than One Reporting Person				
(City) (State) (Zip)																		
		Та	ble I - Non-	-Deriva	tive S	ecuritie	s Ac	quired,	Disp	osed c	of, or Be	nefici	ally	Owned				
Date			Date	Transaction te 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 2) Disposed Of (D) (Instr. 3, 4)			red (A) o str. 3, 4 a	4 and 5) Securities Beneficia		s Forr		m: Direct or Indirect	7. Nature of Indirect Beneficial Ownership			
						(Month/Day/Year		r) 8)				Owned F Reported		· " "	(I) (INS	(Instr. 4)	(Instr. 4)	
								Code	V	Amount	(A) (D)	or Pri	ce	Transacti (Instr. 3 a	on(s) nd 4)			
Common Stock, \$0.0001 par value per share 10/02				10/02/	/2007		A		30,000 ⁽¹⁾ A			(1)	30,000			D		
			Table II - D											wned				
				e.g., pu	is, ca	_		, option										1
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	Cod	saction e (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)			3. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	re Constant	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	e V	(A)		Date Exercisabl		xpiration ate	Title	Amou or Numb of Sha	er		(Instr. 4)			
Stock Option (right to	\$5.2	10/02/2007		P		260,000		(2)	1	0/02/2017	Common Stock	260,0	000	(3)	260,00	00	D	

Explanation of Responses:

- 1. The restricted stock award vests over a 3 year period with 33 1/3% vesting on the first anniversary of the grant date or 10/02/2008, 33 1/3% vesting on the second anniversary of the grant date or 10/02/2009, and the balance vesting on the third anniversary of the grant date or 10/02/2010.
- 2. The option vests over a 4 year period with 20% vesting immediately, 20% vesting on the first anniversary of the grant date or 10/02/2008 and the remainder vesting monthly on a pro-rata basis over the succeeding 36 months following the first anniversary date.
- 3. On October 2, 2007, the date such stock options were granted and restricted stock was awarded, the closing price of the Issuer's common stock was \$5.20 per share.

<u>/s/ Eric Richman</u> <u>10/04/2007</u>

** 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.