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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* SCHAFFER DERACE L						2. Issuer Name and Ticker or Trading Symbol HEALTHCARE ACQUISITION CORP [HAQ]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(F	irst) (Middle)			.Ų]) y	Officer below)	(give title		Other (s	specify
HEALTHCARE ACQUISITION CORP. 2116 FINANCIAL CENTER 666 WALNUT STREET						Date of Earliest Transaction (Month/Day/Year) 12/15/2005 4. If Amendment, Date of Original Filed (Month/Day/Year)									Vice Chairman and CEO 6. Individual or Joint/Group Filing (Check Applicable					
(Street) DES MOINES IA 50309															Line)	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	State) (Zip)																	
		Tabl	e I - Non	-Deriv	ative	Sec	uritie	es Ac	quire	ed, D	isp	osed c	of, or Be	enefi	iciall	y Owned	ı .			
1. Title of Security (Instr. 3) 2. Transa Date (Month/L						ar) E	2A. Deemed Execution Date, if any (Month/Day/Yea		Co	Transaction Code (Instr.			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			5. Amou Securitie Benefici Owned F	es Fo ally (D Following (I)	Form (D) or	Ownership orm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Co	ode \	V Amoun		(A) (D)	or P	rice	Transaci (Instr. 3	tion(s)			instr. 4)
Common Stock															882,000			D		
		Т	able II - I (•	•		, or Ben ble sec		•	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		of		6. Date Exercisable ar Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			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)		Date Exerci	isable	Ex Da	piration ate	Title	or	ount nber res					
Warrants ⁽¹⁾	\$6	12/15/2005			P		600		(2	2)	07	/27/2009	Common Stock	6	00	\$1.2	131,96	D	D	

Explanation of Responses:

- 1. Purchase made on behalf of Dr. Schaffer pursuant to the guidelines set forth in SEC Rule 10b5-1 in connection with a Rule 10b5-1 Plan.
- 2. The Warrants will become exercisable on the later of the completion of a business combination with a target business and July 28, 2006.

12/19/2005 /s/ Derace Schaffer, MD

** 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.