(Last)

(First)

(Middle)

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).
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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							
Estimated average burden								

hours per response:	0.5
Estimated average burden	

1. Name and Address of Reporting Person [*] DOMAIN PARTERS VII L P (Last) (First) (Middle)				CAI CAD	2. Issuer Name and Ticker or Trading Symbol <u>CADENCE PHARMACEUTICALS INC</u> [CADX]									heck all ap Dire	ctor er (give title	-	10% C	Owner (specify		
C/O DOMAIN ASSOCIATES, LLC				3. Date of Earliest Transaction (Month/Day/Year) 03/01/2013																
ONE PA	LMER SQU	JARE			4. If Ar	4. If Amendment, Date of Original Filed (Month/Day/Year)								6.	Individual o	or Joint/Group) Filing (C	heck A	oplicable	
(Street) PRINCETON NJ 08542						4. n Amenument, Date of Oliginal Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person					
(City)	(St	ate) (Zip)													5011				
		Tabl	e I - Nor	n-Deriv	ative S	ecu	ritie	s Aco	quired,	Disp	osed o	f, or∣	Bene	eficia	lly Own	ed			-	
1. Title of S	Security (Inst	r. 3)		Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (8)					(A) or 3, 4 an	d Secur Benef Owne	5. Amount of Securities Beneficially Owned Following		ship rect lirect 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A (D	(A) or (D) P		Repor Trans (Instr.	ted action(s) 3 and 4)			(Instr. 4)	
Common	Stock			03/0	1/2013				S ⁽¹⁾		7,635		D	\$ <mark>5.0</mark>)1 2,5	2,509,130		D ⁽²⁾⁽³⁾⁽⁴⁾		
Common	Stock			03/04	4/2013				S ⁽¹⁾		5,145		D	\$ <mark>5.0</mark>)1 2,5	503,985	D ⁽²⁾⁽³)(4)		
		Ta	uble II - E (sed of, onvertib				Owned					
1. Title of Derivative Security (Instr. 3)	tle of 2. 3. Transaction 3A. Deemed vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any			ed Date,	4. Transacti Code (Ins 8)	5. Number 6 saction of E		6. Date E Expiratio	6. Date Exercisable and Expiration Date Amo (Month/Day/Year) Secu Unde Deriv			Fitle and nount of curities derlying rivative curity (Instr. 3		8. Price of Derivative Security (Instr. 5) 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V		(A)	(D)	Date Exercisal		Expiration Date	Title	Amc or Num of Shai	nber						
		Reporting Person [*] TERS VII L P																		
(Last)		(First)	(Midd	lle)																
	MAIN ASS LMER SQU	OCIATES, LLC																		
-																				
(Street) PRINCE	TON	NJ	0854	12																
(City)		(State)	(Zip)																	
	d Address of JAMES	Reporting Person [*] <u> C</u>																		
		(First) OCIATES, LLC JARE	(Midd	lle)																
(Street) PRINCE	TON	NJ	0854	12																
(City)		(State)	(Zip)																	
	d Address of	Reporting Person [*]]														

C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE								
(Street) PRINCETON	NJ	08542						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person [*] TREU JESSE I								
(Last) (First) (Middle) C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE								
(Street) PRINCETON	NJ	08542						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person [*] VITULLO NICOLE								
(Last) C/O DOMAIN ASS ONE PALMER SQ		(Middle)						
(Street) PRINCETON	NJ	08542						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person [*] Halak Brian K								
(Last) C/O DOMAIN ASS ONE PALMER SQ		(Middle)						
(Street) PRINCETON	NJ	08542						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* SCHOEMAKER KATHLEEN K								
(Last) C/O DOMAIN ASS ONE PALMER SQ		(Middle)						
(Street) PRINCETON	NJ	08542						
(City)	(State)	(Zip)						

Explanation of Responses:

1. Sold pursuant to a Rule 10b5-1 Sales Plan adopted by the Reporting Person with respect to the Common Stock of the Issuer.

2. The securities reported as directly beneficially owned by the Reporting Person may be deemed to be indirectly beneficially owned by each of the Reporting Owners listed below, each of whom is a managing member of One Palmer Square Associates VII, LLC, the sole general partner of the Reporting Person. Pursuant to Instruction 4(b)(iv) of Form 4, each such individual has elected to report as indirectly beneficially owned the entire number of securities owned by the Reporting Person, however each of them disclaims beneficial ownership of any securities, and any proceeds thereof, that exceed his or her pecuniary interest therein and/or that are not actually distributed to him or her.

3. As managing members of Domain Associates, LLC, each Reporting Owner listed below may also be deemed to indirectly beneficially own 27,500 shares of Common Stock held by Domain Associates, LLC.

4. As managing members of the respective sole general partners of DP VII Associates, L.P., Domain Partners VI, L.P. and DP VI Associates, L.P., each Reporting Owner listed below (except for Brian K. Halak with respect to Domain Partners VI, L.P. and DP VI Associates, L.P.) may also be deemed to indirectly beneficially own the securities of the Issuer held by each such entity, as reported on Form 4s for each such entity filed separately on the same date as this Form 4.

Remarks:

/s/Kathleen K. Schoemaker, as 03/05/2013 Managing Member of One Palmer Square Associates VII, LLC, General Partner of Domain Partners VII, L.P.,

individually, & as Attorney-in-
Fact for James C. Blair, BrianH. Dovey, Jesse I. Treu, NicoleVitullo and Brian K. Halak** Signature of Reporting PersonDate

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.