\Box

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)

DOVEY BRIAN H

(First)

C/O DOMAIN ASSOCIATES, LLC

(Last)

(Middle)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden rs per response: 0.5

7. Nature of Indirect Beneficial Ownership (Instr. 4)

11. Nature of Indirect Beneficial Ownership (Instr. 4)

	ions may conti tion 1(b).	nue. See		File							ties Exchan		of 1934	ı		hours	s per response:	0
1. Name and Address of Reporting Person* DP VII ASSOCIATES LP (Last) (First) (Middle) C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE				2. Iss <u>CA</u>	CADENCE PHARMACEUTICALS INC [Check all applica CADX] (Check all applica Director										plicable)	X 10% Owner		
					3. Date of Earliest Transaction (Month/Day/Year) 02/20/2013									belo			below)	
(Street) PRINCETON NJ 08542				4. If A	4. If Amendment, Date of Original 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)	(S		(Zip)															
1. Title of \$	Security (Ins		le I - Nor	2. Trans		2A Ex	. Deen ecutio		3. Trans Code	actio		ties Acc	uired (A) or	5. Amo Securi Benefi Owned	ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	of Indire Benefici Ownersh
								Code	v	Amount		(A) or (D) Price		Reported Transaction(s (Instr. 3 and 4)			(Instr. 4)	
Common Stock 02/20/				0/2013	/2013		S ⁽¹⁾		34		D	\$5.01	4	12,949	D(2)(3)(4)			
		Ta									osed of, convertib				wned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transac Code (In 8)		n of E		6. Date I Expiration (Month/I	on Da		7. Title Amou Secur Under Deriva Secur and 4)	nt of ities lying itive ity (Inst	De Se (In:	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Benefici Ownersl t (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amou or Numb of Share	ber				
l		Reporting Person*				_												
	MAIN ASS LMER SQI	(First) OCIATES, LLC UARE	(Mido	lle)														
(Street) PRINCE	TON	NJ	0854	12														
(City)		(State)	(Zip)															
ı	nd Address of	Reporting Person*																
	MAIN ASS LMER SQI	(First) OCIATES, LLC UARE	(Mido	ile)														
(Street) PRINCE	TON	NJ	0854	12														
(City)		(State)	(Zip)															
1. Name ar	nd Address of	Reporting Person*																

ONE PALMER SQUARE								
(Street) PRINCETON	-							
(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) (First) (Middle) C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE								
(Street)								
PRINCETON	NJ	08542						
(City)	(State)	(Zip)						
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) (First) (Middle) C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE								
(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 Domain Partners VII, 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 02/22/2013
Managing Member of One
Palmer Square Associates VII,
LLC, General Partner of DP
VII Associates, L.P.,
individually, & as Attorney-in-

Fact for James C. Blair, Brian H. Dovey, Jesse I. Treu, Nicole Vitullo and Brian K. Halak

** 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.