FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| ngton, D.C. 20549 | OMB APPROVAL |
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|                   |              |
|                   |              |

| OMB Number:          | 3235-0287 |  |  |  |  |  |
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| Estimated average bu | rden      |  |  |  |  |  |
| 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

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* <u>Jansz Anthony P.</u> |   |            |   |                     |                              | 2. Issuer Name and Ticker or Trading Symbol EnteroMedics Inc [ ETRM ] |  |  |  |          |                                |   |   | Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner |   |                                       |  |                                       |  |
|--|---|------------|---|---------------------|------------------------------|---|--|--|--|----------|--------------------------------|---|---|---|---|---------------------------------------|--|---------------------------------------|--|
| (Last) (First) (Middle) 2800 PATTON ROAD                         |   |            |   |                     |                              | 3. Date of Earliest Transaction (Month/Day/Year) 05/05/2011           |  |  |  |          |                                |   |   |   | (give title   |                                       | Other (specify below)  |                                       |  |
| (Street) ST. PAUL MN 55113 (City) (State) (Zip)                  |   |            |   |                     | _   4.                       | If Ame  | endment, l   | Date o                                 | of Original  | Filed    | (Month/Da                      | Line                                    | ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |   |   |                                       |  |                                       |  |
|  |   | Tal        | ole I - No  | n-Deri              | ivativ                       | e Se  | curitie  | s Ac                                   | quired,  | Dis      | posed o                        | f, or Ber                               | neficial  | y Owned   | I   |                                       |  |                                       |  |
| Date   |   |            |   | nsaction<br>h/Day/Y | - 1                          | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year            |  | , Transaction Dispo<br>Code (Instr. 5) |  | Disposed | ties Acquire<br>I Of (D) (Inst |   | Benefic<br>Owned  | es<br>ally<br>Following   | Form<br>(D) or  | : Direct I<br>r Indirect E<br>str. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership                      |                                       |  |
|  |   |            |   |                     |                              |   |  |  | Code   | v        | Amount                         | (A) or<br>(D)                           | Price   | Reporte<br>Transac<br>(Instr. 3   | on(s)   |                                       |  | (Instr. 4)                            |  |
| Common Stock   |   |            |   |                     |                              |   |  |  |  |          |                                |   | 25  | ,000  |   |                                       | Family<br>Frust <sup>(1)</sup>   |                                       |  |
|  |   |            | Table II -  |                     |                              |   |  |  |  |          |                                | or Bene<br>ole secu                     |   | Owned   |   |                                       |  |                                       |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)              | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security |            | 3A. Deemee<br>Execution I<br>if any<br>(Month/Day | Date,               | 4.<br>Transa<br>Code (<br>8) |   | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D) (Instr.<br>3, 4 and 5) |  | 6. Date Exercisat<br>Expiration Date<br>(Month/Day/Year) |          |                                | of Securiti<br>Underlying<br>Derivative | 7. Title and Amount of Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4)  |   | 9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e<br>s<br>ally<br>g                   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |   |            |   |                     | Code                         | v   | (A)  | (D)                                    | Date<br>Exercisabl                                       |          | Expiration<br>Date             | Title                                   | Amount<br>or<br>Number<br>of<br>Shares  |   |   |                                       |  |                                       |  |
| Director<br>Option<br>(Right to                                  | \$2.63  | 05/05/2011 |   |                     | A                            |   | 25,000   |  | 05/05/2011   | (2)      | 05/05/2021                     | Common<br>Stock                         | 25,000  | \$2.63  | 25,00   | 00                                    | D  |                                       |  |

## Explanation of Responses:

- 1. The reporting person disclaims beneficial interest in the shares held by the Trust.
- $2.\ Vests\ immediately\ as\ to\ 25\%\ on\ date\ noted\ and\ thereafter\ in\ cumulative\ installments\ of\ 1/36th\ per\ month.$

/s/ Mark B. Knudson, Attorneyin-Fact for Anthony P. Jansz 05/09/2011

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.

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.