FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| (Print or Ty | pe Response | es) | | | | | | | | | | | | | | |
|--|---|--|--|---|------|---------|------------------------------|--------------------------------------|--------------------------|--|--|---|--|---|----------------------------|-------------|
| 1. Name and Address of Reporting Person * Fishel Robert Scott | | | | 2. Issuer Name and Ticker or Trading Symbol Opko Health, Inc. [OPK] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
| (Last) (First) (Middle) 4400 BISCAYNE BLVD. | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/21/2018 | | | | | | | | e title below) | | ner (specify belo | ow) | |
| (Street) | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | _X_ | 6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| MIAMI, FL 33137 (City) (State) (Zip) | | | | Table I - Non-Derivative Securities Acqui | | | | | | Acquired | ired, Disposed of, or Beneficially Owned | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year | | Execution Date, if Code any (Month/Day/Year) | | ode | (A) | | Disposed of A and 5) (A) or | | |) | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership | | | |
| | | | | | | | | contair form di uired, Dispo | ed in splay sed of | this forrs a curre | n are not ently valid ficially Ow | required d OMB co | of inform to respon entrol num | d unless t | | 1474 (9-02) |
| Security | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deemed Execution Date, if | 4. Transac Code | tion | 5. Numb | ve es d | Expiration Date (Month/Day/Year) S I | | 7. Title an Amount of Underlying Securities | Title and mount of Inderlying | | 9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owners Form of Derivati Security Direct (or Indire | Ownershi (Instr. 4) D) ect | |
| | | | | Code | V | (A) | (D) | Date Exercisable | | oiration e | Title | Amount or Number of Shares | | | | |
| Stock Option (Right to Buy) | \$ 4.46 | 06/21/2018 | | A | | 20,000 | | 06/21/201 | 9 06/ | 20/2028 | Common Stock | n 20,000 | \$ 0 | 20,000 | D | |

Reporting Owners

| Demonting Common Name / Addison | Relationships | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| Fishel Robert Scott 4400 BISCAYNE BLVD. MIAMI, FL 33137 | X | | | | | | |

Signatures

| Adam Logal, Attorney-In-Fact | 06/22/2018 |
|---------------------------------|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

- * 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.