

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

WASHINGTON, D.C. 20549

FORM 3

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

1. Name and Address of Reporting Person

FRONK, DAVID
1655 Roberts Blvd, NW
Kennesaw, GA 30144

2. Date of Event Requiring Statement (Month/Day/Year)

12/18/98

3. IRS or Social Security Number of Reporting Person (Voluntary)

4. Issuer Name and Ticker or Trading Symbol

CryoLife, Inc.
CRY

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)

() Director () 10% Owner (X) Officer (give title below) () Other
(specify below)

Vice President - Clinical Research

6. If Amendment, Date of Original (Month/Day/Year)

1/13/99

7. Individual or Joint/Group Filing (Check Applicable Line)

(X) Form filed by One Reporting Person
() Form filed by More than One Reporting Person

Table I -- Non-Derivative Securities Beneficially Owned

1. Title of Security	2. Amount of Securities Beneficially Owned	3. Ownership Form: Direct(D) or Indirect(I)	4. Nature of Indirect Beneficial Ownership
Common Stock	1,183 Shares	D	

Table II -- Derivative Securities Beneficially Owned

1. Title of Derivative Security	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Underlying Securities	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct(D) or Indirect(I)	6. Nature of Indirect Beneficial Ownership
Incentive Stock Option	(1) 9/5/03	Common Stock	5,000 14.1875	D	
Incentive Stock Option	(2) 6/18/04*	Common Stock	10,000 12.00	D	

Explanation of Responses:

(1) Exercisable in five equal annual installments of 1,000 shares each beginning on 3/5/99.

(2) Exercisable in five equal annual installments of 2,000 shares each beginning on 12/18/99.

* This amendment is filed to correct the expiration date of the option, which was reported as 12/18/08 in the original Form 3.

SIGNATURE OF REPORTING PERSON

David Fronk

DATE

January 19, 1999