FORM 4

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

OMB APPROVAL
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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 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	s)													
1. Name and Address of Reporting Person *- WONG RODERICK					2. Issuer Name and Ticker or Trading Symbol Health Sciences Acquisitions Corp [HSAC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_ Director 10% Owner				
(Last) (First) (Middle) C/O HEALTH SCIENCES ACQUISITIONS CORP., 412 WEST 15TH STREET, FLOOR 9				11/	3. Date of Earliest Transaction (Month/Day/Year) 11/12/2019						X Officer (give title below) Other (specify below) Chief Executive Officer				
(Street) NEW YORK, NY 10011				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui					Acquir	ired, Disposed of, or Beneficially Owned					
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	Execu				(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form:	Beneficial		
			(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
Common Shares		11/12/2019			P		100,000) Ι Δ	\$ 10.17	130,500		I	By RTW (1)		
Common Shares		11/13/2019			P		13,000		\$ 10.17	143,500	143,500		I	By RTW (1)	
Common Shares		11/14/2019			P		13,000	I A	\$ 10.17	156,500		I	By RTW (1)		
Reminder:	Report on a s	separate line f	For each class of secu		•		Per con the	sons who tained in form dis	o respor this for plays a	m are curren	not requ tly valid		formation spond unle trol numbe	ss	1474 (9-02)
		1	1 abie 11 -		ative Securit outs, calls, wa			-			y Owned	1	1		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transactic Date (Month/Day	Execution D	ate, if	Ì	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	and Expiration Date (Month/Day/Year) Ur. Se		Amo Unde Secur (Instr	tle and unt of erlying rities : 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form o Derivat Security Direct (or Indir	ownershi y: (Instr. 4) D) ect	
					Code V	(A) (D)	Dat Exc		Expiratior Date	Title	Amount or Number of Shares				

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
WONG RODERICK C/O HEALTH SCIENCES ACQUISITIONS CORP. 412 WEST 15TH STREET, FLOOR 9 NEW YORK, NY 10011	X		Chief Executive Officer			

Signatures

/s/ Roderick Wong	11/14/2019
***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).
 - The securities reported herein may be deemed to be beneficially owned by each of: (i) RTW Investments, LP ("RTW"), which is deemed the beneficial owner of securities held by RTW Master Fund, Ltd., RTW Venture Fund Limited and RTW Innovation Master Fund, Ltd. (the "Funds"), which are investment funds managed by RTW, and (ii)
- (1) Roderick Wong, M.D., who serves as the Managing Partner and Chief Investment Officer of RTW. Dr. Wong exercises voting and dispositive control over the securities held by RTW and is therefore deemed to be a beneficial owner of securities owned or controlled by RTW. Each of RTW and Dr. Wong disclaims beneficial ownership of the reported securities held by the Funds, except to the extent of its or his pecuniary interest therein.

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.