# SECURITIES & EXCHANGE COMMISSION Washington, D.C. 20549

#### SCHEDULE 13G (Rule 13d-102)

### INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT TO RULES 13d-1(b), (c) AND (d) AND AMENDMENTS THERETO FILED PURSUANT TO RULE 13d-2

(Amendment No.)\*

#### Idera Pharmaceuticals, Inc. (Name of Issuer)

Common Stock, \$.001 Par Value Per Share (Title of Class of Securities)

45168K306

(CUSIP Number)

September 25, 2013

(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

 $\square \qquad \text{Rule 13d-1(b)}$ 

Rule 13d-1(c)

 $\Box$  Rule 13d-1(d)

### (Page 1 of 15 Pages)

\*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for purposes of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

(1) NAMES OF REPORTING PERSONS HealthCor Management, L.P.

# (2) CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP

(see instructions)	)

(3)	SEC USE ONLY				
(4)	CITIZENS Delaware	HIP OR P	PLACE OF ORGANIZATION		
NUMBER SHARES BENEFIC		(5)	SOLE VOTING POWER 0		
OWNED I EACH REPORTI	BY	(6)	SHARED VOTING POWER 3,270,000		
PERSON		(7)	SOLE DISPOSITIVE POWER 0		
		(8)	SHARED DISPOSITIVE POWER 3,270,000		
(9)			DUNT BENEFICIALLY OWNED ING PERSON		
(10)			IE AGGREGATE AMOUNT JDES CERTAIN SHARES (see instructions)		
(11)	1) PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 5.6%				
(12)	TYPE OF F PN	REPORTI	NG PERSON (see instructions)		

(1) NAMES OF REPORTING PERSONS HealthCor Associates, LLC

(2) CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP

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(see instru	ctions)

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			(see instructions)	(a) ⊠ (b) □
(3)	SEC USE O	NLY		
(4)	CITIZENSH Delaware	IP OR P	LACE OF ORGANIZATION	
NUMBER SHARES BENEFICL		(5)	SOLE VOTING POWER 0	
OWNED B EACH REPORTIN	Y	(6)	SHARED VOTING POWER 3,270,000	
PERSON V		(7)	SOLE DISPOSITIVE POWER 0	
		(8)	SHARED DISPOSITIVE POWER 3,270,000	
(9)			DUNT BENEFICIALLY OWNED ING PERSON	
(10)	0) CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (see instructions)			
(11)	1) PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 5.6%			
(12)	TYPE OF RE OO - limited		NG PERSON (see instructions) company	

(1)	NAMES OF REPORTING PERSONS HealthCor Offshore Master Fund, L.P.					
(2)	CHECK THE	APPRO	OPRIATE BOX IF A MEMBER OF A GROUP (see instructions)	(a) ⊠ (b) □		
(3)	SEC USE ON	NLY				
(4)	CITIZENSHI Cayman Islar		LACE OF ORGANIZATION			
NUMBER SHARES BENEFICI			SOLE VOTING POWER 0			
OWNED E EACH REPORTIN	3Y	(6)	SHARED VOTING POWER 3,000,000			
PERSON WITH		(7)	SOLE DISPOSITIVE POWER 0			
		(8)	SHARED DISPOSITIVE POWER 3,000,000			
(9)	AGGREGAT BY EACH RI 3,000,000		OUNT BENEFICIALLY OWNED ING PERSON			
(10)	) CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (see instructions)					
(11)	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 5.1%					
(12)	TYPE OF RE PN	TYPE OF REPORTING PERSON (see instructions) PN				

(1) NAMES OF REPORTING PERSONS HealthCor Offshore GP, LLC

(2) CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions)

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(a) (b)	

(3)	SEC USE C	DNLY		
(4)	CITIZENSE Delaware	HP OR P	LACE OF ORGANIZATION	
NUMBER OF SHARES		(5)	SOLE VOTING POWER 0	
. –			SHARED VOTING POWER 3,000,000	
PERSON		(7)	SOLE DISPOSITIVE POWER 0	
	(		SHARED DISPOSITIVE POWER 3,000,000	
(9)			DUNT BENEFICIALLY OWNED ING PERSON	
(10)			IE AGGREGATE AMOUNT JDES CERTAIN SHARES (see instructions)	
(11)	<ul> <li>PERCENT OF CLASS REPRESENTED</li> <li>BY AMOUNT IN ROW (9)</li> <li>5.1%</li> </ul>			
(12)	TYPE OF R OO - limited		NG PERSON (see instructions) company	

13G

(1) NAMES OF REPORTING PERSONS HealthCor Group, LLC

(2) CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions)

# (a) ⊠ (b) □

(3)	SEC USE C	ONLY		
(4)	CITIZENSE Delaware	HIP OR P	PLACE OF ORGANIZATION	
NUMBER SHARES BENEFIC		(5)	SOLE VOTING POWER 0	
OWNED I EACH REPORTI	BY	(6)	SHARED VOTING POWER 3,270,000	
PERSON		(7)	SOLE DISPOSITIVE POWER 0	
		(8)	SHARED DISPOSITIVE POWER 3,270,000	
(9)			DUNT BENEFICIALLY OWNED ING PERSON	
(10)	) CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (see instructions)			
(11)	) PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 5.6%			
(12)	) TYPE OF REPORTING PERSON (see instructions) OO - limited liability company			

(1) NAMES OF REPORTING PERSONS Arthur Cohen

(2) CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions)

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(2)	chilek m		OPRIATE BOA IF A MEMBER OF A GROUP (see instructions)	(a) ⊠ (b) □
(3)	SEC USE C	ONLY		
(4)	CITIZENSF United State		PLACE OF ORGANIZATION	
NUMBER OF SHARES		(5)	SOLE VOTING POWER 0	
BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH	BY	(6)	SHARED VOTING POWER 3,270,000	
		(7)	SOLE DISPOSITIVE POWER 0	
		(8)	SHARED DISPOSITIVE POWER 3,270,000	
(9)			DUNT BENEFICIALLY OWNED ING PERSON	
(10)	)) CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (see instructions)			
(11)	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 5.6%			
(12) TYPE OF REPORTING PERSON (see instructions) IN				

13G

(1) NAMES OF REPORTING PERSONS Joseph Healey

(2) CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions)

(a)	X
à	

(b) 🛛

(3)	SEC USE (	ONLY		
(4)	CITIZENSI United State		LACE OF ORGANIZATION	
NUMBER OF SHARES		(5)	SOLE VOTING POWER 0	
BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH	BY	(6)	SHARED VOTING POWER 3,270,000	
		(7)	SOLE DISPOSITIVE POWER 0	
		(8)	SHARED DISPOSITIVE POWER 3,270,000	
(9)			DUNT BENEFICIALLY OWNED ING PERSON	
(10)	(10) CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (see instructions)			
(11)	<ul> <li>(11) PERCENT OF CLASS REPRESENTED</li> <li>BY AMOUNT IN ROW (9)</li> <li>5.6%</li> </ul>			
(12)	TYPE OF F IN	REPORTI	NG PERSON (see instructions)	

(1)	NAMES OF REPORTING PERSONS HealthCor Long Offshore Master Fund, L.P.
(2)	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions)

				(-)
(3)	SEC USE O	NLY		
(4)	CITIZENSHI Cayman Islar		PLACE OF ORGANIZATION	
NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH		(5)	SOLE VOTING POWER 0	
		(6)	SHARED VOTING POWER 270,000	
		(7)	SOLE DISPOSITIVE POWER 0	
		(8)	SHARED DISPOSITIVE POWER 270,000	
(9)			OUNT BENEFICIALLY OWNED 'ING PERSON	
(10)	) CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (see instructions)			
(11)	) PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 0.5%			
(12) TYPE OF REPORTING PERSON (see instructions) PN				

(a) ⊠ (b) □

13G

(1)	NAMES OF REPORTING PERSONS HealthCor Long Master GP, LLC				
(2)	2) CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions)			(a) ⊠ (b) □	
(3)	SEC USE O	NLY			
(4)	) CITIZENSHIP OR PLACE OF ORGANIZATION Delaware				
NUMBER SHARES BENEFICI		(5)	SOLE VOTING POWER 0		
OWNED I EACH REPORTIN	BY	(6)	SHARED VOTING POWER 270,000		
PERSON		(7)	SOLE DISPOSITIVE POWER 0		
		(8)	SHARED DISPOSITIVE POWER 270,000		
(9)	<ul> <li>AGGREGATE AMOUNT BENEFICIALLY OWNED</li> <li>BY EACH REPORTING PERSON</li> <li>270,000</li> </ul>				
(10)	) CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (see instructions)				
(11)	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 0.5%				
(12)	<ul> <li>TYPE OF REPORTING PERSON (see instructions)</li> <li>OO – limited liability company</li> </ul>				

#### CUSIP No. 45168K306

13G

Item 1(a). Name of Issuer: Idera Pharmaceuticals, Inc.

- Item 1(b).Address of Issuer's Principal Executive Offices:<br/>167 Sidney Street, Cambridge, MA 02139
- Item 2(a, b, c). Name of Person Filing:

(i) HealthCor Management, L.P., a Delaware limited partnership, Carnegie Hall Tower, 152 West 57th Street, 43rd Floor, New York, New York 10019;

(ii) HealthCor Associates, LLC, a Delaware limited liability company, Carnegie Hall Tower, 152 West 57th Street, 43rd Floor, New York, New York 10019;

(iii) HealthCor Offshore Master Fund, L.P., a Cayman Islands limited partnership, Carnegie Hall Tower, 152 West 57th Street, 43rd Floor, New York, New York 10019;

(iv) HealthCor Offshore GP, LLC, a Delaware limited liability company, Carnegie Hall Tower, 152 West 57th Street, 43rd Floor, New York, New York 10019;

(v) HealthCor Group, LLC, a Delaware limited liability company, Carnegie Hall Tower, 152 West 57th Street, 43rd Floor, New York, New York 10019;

(vi) Joseph Healey, Carnegie Hall Tower, 152 West 57th Street, 43rd Floor, New York, New York 10019;

(vii) Arthur Cohen, 12 South Main Street, #203 Norwalk, Ct 06854;

(viii) HealthCor Long Offshore Master Fund, L.P., a Cayman Islands limited partnership, Carnegie Hall Tower, 152 West 57th Street, 43rd Floor, New York, New York 10019; and

(ix) HealthCor Long Master GP, LLC., a Delaware limited liability company, Carnegie Hall Tower, 152 West 57th Street, 43rd Floor, New York, New York 10019.

Both Mr. Healey and Mr. Cohen are United States citizens.

The persons at (i) through (ix) above are collectively referred to herein as the "Reporting Persons".

#### CUSIP No. 45168K306

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Item 2(d). Title of Class of Securities: Common Stock, \$.001 Par Value Per Share (the "Common Stock")

- Item 2(e). CUSIP Number: 45168K306
- Item 3. Not applicable.
- Item 4. Ownership.

The information required by Items 4(a) - (c) is set forth in Rows 5 - 11 of the cover page for each Reporting Person hereto and is incorporated herein by reference for each such Reporting Person.

Collectively, HealthCor Offshore Master Fund, L.P. and HealthCor Long Offshore Master Fund, L.P. (each a "Fund" and together, the "Funds") are the beneficial owners of a total of 3,270,000 shares of the Common Stock of the Issuer.

HealthCor Offshore GP, LLC is the general partner of HealthCor Offshore Master Fund, L.P. Accordingly, HealthCor Offshore GP, LLC may be deemed to beneficially own the shares of Common Stock that are beneficially owned by HealthCor Offshore Master Fund, L.P. HealthCor Group, LLC is the general partner of HealthCor Offshore GP, LLC and, therefore, may be deemed to beneficially own the shares of Common Stock that are beneficially owned by HealthCor Offshore Master Fund, L.P.

HealthCor Long Master GP, LLC is the general partner of HealthCor Long Offshore Master Fund, L.P. Accordingly, HealthCor Long Master GP, LLC may be deemed to beneficially own the shares of Common Stock that are beneficially owned by HealthCor Long Offshore Master Fund, L.P. HealthCor Group, LLC is the general partner of HealthCor Long Master GP, LLC and, therefore, may be deemed to beneficially own the shares of Common Stock that are beneficially owned by HealthCor Long Offshore Master Fund, L.P.

By virtue of its position as the investment manager of the Funds, HealthCor Management, L.P. may be deemed a beneficial owner of all the shares of Common Stock owned by the Funds. HealthCor Associates, LLC is the general partner of HealthCor Management, L.P. and thus may also be deemed to beneficially own the shares of Common Stock that are beneficially owned by the Funds.

CUSIP No. 45168K	306 13G	Page 13 of 15 Pages
	As the Managers of HealthCor Associates, LLC, Arthur Cohen and Joseph Healey exercise both voting and inverse respect to the shares of Common Stock reported herein, and therefore each may be deemed a beneficial owner of	1
	Each of the Reporting Persons hereby disclaims any beneficial ownership of any such shares of Common Stoc actual pecuniary interest therein.	k in excess of their
Item 5.	Ownership of Five Percent or Less of a Class:	
	If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be the more than five percent of the class of securities, check the following $\Box$ .	beneficial owner of
Item 6.	Ownership of More than Five Percent on Behalf of Another Person. Not Applicable	
Item 7.	Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on by the Pare Not Applicable	nt Holding Company.
Item 8.	Identification and Classification of Members of the Group. See Exhibit 1.	
Item 9.	Notice of Dissolution of Group. Not Applicable	
Item 10.	Certification.	
	By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and are not held in connection with or as a participant in any transaction having that purpose or effect.	
Exhibits:		

Exhibit I: Joint Acquisition Statement, dated as of October 3, 2013.

# SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

DATED: October 3, 2013

# HEALTHCOR MANAGEMENT, L.P.

By: HealthCor Associates, LLC, its general partner

By: /s/ John H. Coghlin Name: John H. Coghlin Title: General Counsel

HEALTHCOR OFFSHORE GP, LLC, for itself and as general partner of behalf of HEALTHCOR OFFSHORE MASTER FUND, L.P.

By: HealthCor Group, LLC, its general partner

By: /s/ John H. Coghlin Name: John H. Coghlin Title: General Counsel HEALTHCOR LONG MASTER GP, LLC, for itself and as general partner of behalf of HEALTHCOR LONG OFFSHORE MASTER FUND, L.P.

By: HealthCor Group, LLC, its general partner

By: /s/ John H. Coghlin		
Name: John H. Coghlin		
Title: General Counsel		

HEALTHCOR ASSOCIATES, LLC

By: /s/ John H. Coghlin Name: John H. Coghlin Title: General Counsel

# HEALTHCOR GROUP, LLC

By: /s/ John H. Coghlin Name: John H. Coghlin Title: General Counsel

JOSEPH HEALEY, Individually

/s/ Joseph Healey

ARTHUR COHEN, Individually

/s/ Arthur Cohen

# EXHIBIT 1

# JOINT ACQUISITION STATEMENT PURSUANT TO RULE 13d-1(k)

The undersigned acknowledge and agree that the foregoing statement on Schedule 13G is filed on behalf of each of the undersigned and that all subsequent amendments to this statement on Schedule 13G shall be filed on behalf of each of the undersigned without the necessity of filing additional joint acquisition statements. The undersigned acknowledge that each shall be responsible for the timely filing of such amendments, and for the completeness and accuracy of the information concerning him or it contained therein, but shall not be responsible for the completeness and accuracy of the information concerning him or it knows or has reason to believe that such information is inaccurate.

Dated: October 3, 2013

#### HEALTHCOR MANAGEMENT, L.P.

By: HealthCor Associates, LLC, its general partner

By: /s/ John H. Coghlin Name: John H. Coghlin Title: General Counsel

# HEALTHCOR OFFSHORE GP, LLC, for itself and as general partner of behalf of HEALTHCOR OFFSHORE MASTER FUND, L.P.

By: HealthCor Group, LLC, its general partner

By: /s/ John H. Coghlin Name: John H. Coghlin Title: General Counsel

# HEALTHCOR LONG MASTER GP, LLC, for itself and as general partner of behalf of HEALTHCOR LONG OFFSHORE MASTER FUND, L.P.

By: HealthCor Group, LLC, its general partner

By: /s/ John H. Coghlin

Name: John H. Coghlin Title: General Counsel

# HEALTHCOR ASSOCIATES, LLC

By: /s/ John H. Coghlin Name: John H. Coghlin Title: General Counsel

HEALTHCOR GROUP, LLC

By: /s/ John H. Coghlin Name: John H. Coghlin Title: General Counsel

JOSEPH HEALEY, Individually

/s/ Joseph Healey

ARTHUR COHEN, Individually

/s/ Arthur Cohen