Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* <u>Gregory Gary</u>						2. Issuer Name and Ticker or Trading Symbol NeuroMetrix, Inc. [NURO]								eck all appli Directo	ationship of Reporting k all applicable) Director		g Person(s) to Issu 10% Ow Other (s)	
(Last) (First) (Middle) C/O NEUROMETRIX, INC. 62 FOURTH AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 11/08/2005								below)	fficer (give title elow) Chief Operatin		elow)	респу
(Street)	Street) WALTHAM MA 02451				4.	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person												ı
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					action	2A. Deemed Execution Date			3. Transa Code (ction	sposed of, or Benefic 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at			5. Amou Securiti Benefici	nt of es ally	6. Ownership Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial
						(Mo	onth/E	Day/Year)	8) Code	v	Amount	(A) or (D)	Price	Owned I Reporte Transac (Instr. 3	tion(s)	(I) (Instr. 4		Ownership (Instr. 4)
Common Stock 11/08/20					/2005	005			M		70,000	A	\$2.25	2,2	54 ⁽¹⁾	D		
Common Stock 11/08/2					/2005	005			S		70,000	D	\$34.933	36 2,2	54(1)	D		
Common Stock 11/09/20					/2005	005		S		5,000(4)	D	\$35	2,2	54(1)	D			
		-	Table II	- Deriv (e.g.,	ative puts,	Secu calls	ıritie S, Wa	es Acq arrants	uired,	Dis	posed of, converti	or Bene ble secu	eficially rities)	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Executio if any (Month/E		4. Transa Code (8)				6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4		Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (right to buy Common Stock)	\$2.25	11/08/2005			М			13,333	(2)		06/05/2013	Common Stock	13,333	\$2.25	6,667	,	D	
Employee Stock Option (right to buy Common	\$2.25	11/08/2005			M			56,667	(3)		07/01/2012	Common Stock	56,667	\$2.25	53,333	3	D	

Explanation of Responses:

- 1. This number reflects the number of securities beneficially owned after taking into account all of the reported transactions and includes 2,254 shares issued pursuant to participation in the NeuroMetrix, Inc. Employee Stock Purchase Plan
- 2. This stock option vests as follows: 2/7th of the option vests on June 5, 2004 and the remainder in 30 equal monthly installments thereafter.
- 3. This stock option vests as follows: 2/7th of the option vests on July 1, 2003 and the remainder in 30 equal monthly installments thereafter.
- 4. The 5,000 shares sold on November 9, 2005 were sold by Mr. Gregory's wife.

/s/ Nicholas J. Alessi, Attorney-11/10/2005 in-Fact

** Signature of Reporting Person

Date

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

- * 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.