FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
	OMB Number:	3235-0287				
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l	hours per response:	0.5				

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

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Name and Address of Reporting Person* Constraint Sheit							2. Issuer Name and Ticker or Trading Symbol NeuroMetrix, Inc. [NURO]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Gozani Shai						Treatometria, me. [Nono]									X Director				10% C	wner		
															X	Offic	er (give title		Other	(specify		
(Last) (First) (Middle)							Date of Earliest Transaction (Month/Day/Year)									below)			below)			
C/O NEUROMETRIX. INC.						12/01/2017									President & CEO							
, -:-																						
1000 WINTER STREET																						
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable							
(Street)																	Line)					
WALTHAM MA 02451														X Form filed by One Reporting Person								
,					.												n filed by Moi	re than Or	ie Rep	orting		
(City) (State) (Zip)															Person							
(City)	(51	aie) (.	<u> </u>																			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of S	Security (Inst	r. 3)		2. Trans	action					3. 4. Securities Acquired (A)								6. Ownership		7. Nature		
				Date (Month)	Day/Ye	Execution Date, ay/Year) if any				Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)				3, 4 a	4 and Securi				Form: Direct D) or Indirect	of Indirect Beneficial		
				((,,		(Month/Day/Year)										d Following		(I) (Instr. 4)	Ownership		
									Codo	,,	Amount	(A) or D		Duia	Trong		tea action(s)			(Instr. 4)		
									Code	V	Amount		(D)	Price		(Instr. 3 and 4)						
Common Stock 12/01									P		3,000	3,000 A		\$ <mark>1</mark>	.7	39,863		D				
		Ta	blo II - F)orivat	ivo S	0011	ritios	Λοαιιί	irod Di	cno	cod of	or B	onofi	oiall	· · ·	vnod		,				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																						
1. Title of	2.	3. Transaction	3A. Deeme	ed	4.		5. Number		6. Date Ex	6. Date Exercisabl		able and 7. Titl			8. Price of		9. Number o	f 10.		11. Nature		
Derivative	Conversion	Date (Month/Day/Year)	Execution	Date,	Transa		of E		Expiration	Expiration Date			Amount of			ative	derivative		Ownership	of Indirect		
Security (Instr. 3)	or Exercise Price of		if any (Month/Day	y/Year)	Code (Code (Instr.		. Derivative (I		(Month/Day/Year)			Securities Underlying			ırity r. 5)	Securities Beneficially		Form: Direct (D)	Beneficial Ownership		
` ′	Derivative \(\)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Acquired			Derivative						- [` '		Owned	or Inc		(Instr. 4)		
Security						(A) or Disposed			Security (Ins and 4)				sır. 3	Following Reported			(1) (11)					
							of (D)										Transaction (Instr. 4)	(s)]]			
							(Instr. 3, 4 and 5)										(111511.4)					
									Т			Δm	ount									
							,					or					- 1					
								Date	.	Expiration		Nun	nber									
					Code	v	(A)		Exercisat		Date	Title		res								

Explanation of Responses:

Remarks:

/s/ Thomas T. Higgins, Attorney-in-fact 12/01/2017

** 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.