FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL 3235-0287 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

1. Name and Address of Reporting Person* <u>CONCANNON BRIAN</u>						2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 400 WOOD ROAD						3. Date of Earliest Transaction (Month/Day/Year) 05/01/2007									X Officer (give title Other (specify below) President, Patient Division					
(Street) BRAINTREE MA 02184 (City) (State) (Zip)				4.										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(5			n-Deri	 ivativ	e Se	curit	ies A	Acquired,	Dis	posed (of. or	3ene	eficiall	v Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					saction	ear)	2A. Dee Execut if any (Month	emed ion Da	3. Transa Code (I	3. 4. Secur Transaction Code (Instr.		rities Acquired (A) o		(A) or	5. Amou	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	() ()	A) or D)	Price	Transact (Instr. 3 a	and 4)				
Common Stock 05/)1/200				A		10,000(1)		A	\$47.8	17,	17,154		D		
									cquired, D its, option						Owned					
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution D by or Exercise (Month/Day/Year) if any			Date, Transaction Code (Inst			n of		6. Date Exercisable a Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	or No	mount umber Shares						
Non- Qualified Stock Option (right to buy)	\$22.635								(2)	0:	9/15/2013	Commo Stock		00,000		100,00	00	D		
Non- Qualified Stock Option (right to buy)	\$26.105								(2)	0	5/05/2014	Commo Stock		5,000		15,00	0	D		
Non- Qualified Stock Option (right to buy)	\$41.15								(2)	0	7/27/2012	Commo Stock		9,000		19,00	0	D		
Non- Qualified Stock Option (right to buy)	\$52.76								05/05/2007 ⁽²	0:	5/05/2013	Commo Stock		.6,644		16,64	4	D		

Explanation of Responses:

- 1. Restricted Stock Grant which vest 25% per year over 4 years following the grant date. Grant was made under 2005 Long Term Incentive Compensation Plan.
- 2. Grant to reporting person of right to buy shares of common stock exercisable in annual increments of 25 percent beginning on the first anniversary of the date of grant.

By: Susan Hanlon For: Brian

05/03/2007

** 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.