FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL										
1	OMB Number:	3235-0287									
	Estimated average burde	en									
	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 Sec	tion 30(h)	of the	e Investment	Con	npany Act o	of 1940						
1. Name and Address of Reporting Person*  Popovsky Mark A					2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [ HAE ]								5. 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) 05/05/2006								X Officer (give title below) Other (specify below)  VP, Corporate Medical Director				
(Street) BRAINTREE MA 02184  (City) (State) (Zip)			02184		1. If Am	endment,	Date					ne) X Form Form	filed by One	p Filing (Check Applic ne Reporting Person ore than One Reportin		n	
			(Zip)										Person				
			ble I - Non-						Disp						1	1	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Date (Month/Day/Year)		2A. Deemed Execution Date if any (Month/Day/Ye		Code (Ir 8)			(A) or (D)		Securit Benefic Owned Reporte Transac	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock									Amount	(D)	Price	(instr. 3	(Instr. 3 and 4)		D		
			Table II - D	erivativ	e Sec	urities	Acc	quired, Di	spo	sed of,	or Bene	ficiall					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		e.g., puts, call 4. Transaction Code (Instr.		5. Number		S, Options, convertible  6. Date Exercisable and Expiration Date (Month/Day/Year)				1 8. Price of Derivative Security		e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Cod	e V	(A)	(D)	Date Exercisable		Expiration Date	Title	Amour or Number of Shares	er				
Non- Qualified Stock Option (right to buy)	\$52.76	05/05/2006		A		14,891		05/05/2007 <sup>()</sup>	1) (	05/05/2013	Common Stock	14,89	1 \$0	14,891		D	
Non- Qualified Stock Option (right to buy)	\$22.7188							08/04/2001 <sup>()</sup>	1) (	08/04/2010	Common Stock	74,00	0	74,000		D	
Non- Qualified Stock Option (right to buy)	\$26.105							05/05/2005 <sup>(-)</sup>	1) (	05/05/2014	Common Stock	10,00	0	10,000		D	
Non- Qualified Stock Option (right to buy)	\$31.66							04/29/2003 <sup>()</sup>	1) (	04/29/2012	Common Stock	15,00	0	15,000		D	
Non- Qualified Stock Option (right to buy)	\$33.15							04/30/2002 <sup>(</sup>	1) (	04/30/2011	Common Stock	11,23	0	11,23	30	D	
Non- Qualified Stock Option (right to	<b>\$</b> 41.15							07/27/2006 <sup>(</sup>	1) (	07/27/2015	Common Stock	17,00	0	17,00	00	D	

## Explanation of Responses:

1. 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: Ronald J. Ryan For: Mark A Popovsky

05/09/2006

\*\* Signature of Reporting Person

Date

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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.