FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

OMB APPRO	VAL
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1. Name and Address of Reporting Person [*] LANGER ROBERT		Person*	2. Issuer Name and Ticker or Trading Symbol <u>INVIVO THERAPEUTICS HOLDINGS</u> <u>CORP.</u> [NVIV]		tionship of Reporting all applicable) Director	Perso X	10% Owner
(Last) 98 MONTVAI	(First) LE ROAD	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/13/2012	-	Officer (give title below)		Other (specify below)
(Street) NEWTON (City)	MA (State)	02459 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Form filed by One Form filed by More Person	Report	ing Person
		Table I - Non-Deriv	ative Securities Acquired, Disposed of, or Benefi	cially (Owned		

4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 5. Amount of 6. Ownership 7. Nature Transaction Date Execution Date Securities Form: Direct of Indirect Code (Instr (Month/Day/Year) if any Beneficially (D) or Indirect Beneficial (Month/Day/Year) Owned Following 8) (I) (Instr. 4) Ownership Reported (Instr. 4) (A) or (D) Transaction(s) Code v Amount Price (Instr. 3 and 4) COMMON STOCK, \$0.00001 PAR VALUE 04/13/2012 S 40,160 D \$2.39⁽¹⁾ 8,056,953 D COMMON STOCK, \$0.00001 PAR VALUE 04/16/2012 S 159,840 D \$2.4⁽²⁾ 7,897,113 D

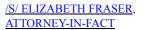
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of 3. Transaction 3A. Deemed 5. Number 6. Date Exercisable and 7. Title and 8. Price of 9. Number of 11. Nature 10 Transaction Ownership Derivative Conversion Date Execution Date. Expiration Date Amount of Derivative derivative of Indirect of Security or Exercise (Month/Day/Year) if any Code (Instr. Derivative (Month/Day/Year) Securities Security (Instr. 5) Securities Form: Direct (D) Beneficial (Instr. 3) Price of 8) Beneficially (Month/Day/Year) Securities Underlying Ownership Derivative Acquired Derivative Owned or Indirect (Instr. 4) (A) or Disposed Following (I) (Instr. 4) Security Security (Instr. 3 and 4) Reported of (D) Transaction(s)

(Instr. 3, 4 and 5)		(Instr. 4)	
Code V (A) (D) Date	Expiration Date Title Amount or Number of Shares		

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$2.36 to \$2.42, inclusive. The reporting person undertakes to provide InVivo Therapeutics Holdings Corp. ("InVivo"), any security holder of InVivo, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote 1.

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$2.36 to \$2.50, inclusive. The reporting person undertakes to provide InVivo Therapeutics Holdings Corp. ("InVivo"), any security holder of InVivo, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote 2.



** Signature of Reporting Person

04/17/2012

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.

Date