FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	. OWNERSHIP

	OMB APPRO	OVAL					
	OMB Number: 3235-028						
l	Estimated average burd	en					
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

1. Name and Address of Reporting Person* LANGER ROBERT (Last) (First) (Middle) 98 MONTVALE ROAD (Street)				2. Is <u>IN</u> <u>CC</u> 3. D 01/	2. Issuer Name and Ticker or Trading Symbol INVIVO THERAPEUTICS HOLDINGS CORP. [NVIV] 3. Date of Earliest Transaction (Month/Day/Year) 01/15/2013 4. If Amendment, Date of Original Filed (Month/Day/Year)								S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner Officer (give title Other (specify below) below) 6. Individual or Joint/Group Filing (Check Applicable Line)							
NEWTO:)2459 Zip)		-										X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - N	on-Deriv	<i>r</i> ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or E	Benefic	ially	Owne	ed				
Date			2. Transac Date (Month/Da		Execution Date,		Date,	3. Transaction Code (Instr. 8)				d 5) Securi Benefi		ficially d 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			Transaction(s) (Instr. 3 and 4)				(111311. 4)	
COMMON STOCK 01/15/					2013	013		S		35,436	D	\$2.4	717(1)	7,0	661,677		D			
COMMON STOCK 01/16/				2013	13		S		102,874	D	\$2.4	4644 ⁽²⁾ 7,		7,558,803		D				
COMMON STOCK 01/17				01/17/2	2013)13		S		52,425	D	\$2.4	2.4621 ⁽³⁾		7,506,378		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		if any	emed ion Date, //Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration D (Month/Day/ ¹		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Secu (Inst		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow For Dir or (I)	nership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares	1						

Explanation of Responses:

- 1. The price reported is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$2.43 to \$2.54, 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 ranges set forth in footnotes 1, 2 and 3.
- 2. The price reported is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$2.40 to \$2.54, inclusive.
- 3. The price reported is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$2.42 to \$2.54, inclusive.

/S/ ELIZABETH FRASER, ATTORNEY-IN-FACT

01/17/2013

** 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.