FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-028

Estimated average burden 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 S	Sectio	n 30(h)	of the Í	nvestme	nt Cor	mpany Act	of 194	10								
1. Name and Address of Reporting Person*  ZUCKERMAN JOSEPH						2. Issuer Name <b>and</b> Ticker or Trading Symbol PHASE III MEDICAL INC/DE [ PHSM.OB ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
														X	Direc			10% C	-		
	Last) (First) (Middle) C/O PHASE III MEDICAL, INC.					3. Date of Earliest Transaction (Month/Day/Year) 11/30/2005										Office	cer (give title ow)		Other (specify below)		
330 SOUTH SERVICE ROAD, SUITE 120				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)							
(Street)																X Form filed by One Reporting Person					
MELVILLE NY 11747															Form filed by More than One Reporting Person						
(City)	(St	ate) (2	Zip)																		
		Tabl	e I - Noi	n-Deriv	ative	Sec	curitie	s Acc	uired,	Dis	posed o	f, or	Bene	ficia	ally C	)wne	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				ay/Year) if a		A. Deemed xecution Date, any Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) I Of (D) (Instr. 3, 4			4 and Se		Securities Beneficially		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	, l·	Transa	action(s) 3 and 4)			(msu. 4)	
Common Stock, \$.001 par value 11/30/					/2005				P		425,000	0 <sup>(1)</sup> A		(1	(1) 785,000		35,000	Ι	)		
	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)	ivative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owi For Dire or Ii (I) (I	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Shai	ber							

## **Explanation of Responses:**

1. As of November 30, 2005, Dr. Zuckerman participated in an exchange offer made by the Company to holders of its outstanding promissory notes (the "Exchange Offer"). Pursuant to the Exchange Offer, Dr. Zuckerman exchanged a promissory note in the principal amount of \$25,000 representing indebtedness of the Company to him into 425,000 shares of the Company's restricted common stock, \$.001 par value (the "Common Stock") based on an exchange ratio of 17,000 shares of Common Stock per \$1,000 of outstanding indebtedness.

/s/ Catherine M. Vaczy as 12/02/2005 attorney in fact

\*\* 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.