FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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	ype Response	(8)																
1. Name and Address of Reporting Person * BUPP DAVID C				2. Issuer Name and Ticker or Trading Symbol NEOPROBE CORP [NEOP]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director							
(Last) (First) (Middle) 425 METRO PLACE NORTH, SUITE 300				3. Date of Earliest Transaction (Month/Day/Year) 03/26/2008														
DUBLIN	I, OH 4301	(Street)		4. If Am	endn	nent, D	ate Origi	nal File	1(Month	Day/Year)		_X_ I	Form filed by C	one Reporting F	p Filing(Check erson eporting Person	Applicable	Line)	
(Ci	(City) (State) (Zip)			Table I - Non-Derivative Securities Acqui						quired,	ired, Disposed of, or Beneficially Owned							
(Instr. 3) Da		2. Transaction Date (Month/Day/Year)			n Date, if	(Instr. 8)		4. Securities Acquires (A) or Disposed of (I) (Instr. 3, 4 and 5)		d of (D)					6. Ownership Form: Direct (D)		7. Nature of Indirect Beneficial Ownership	
					Code	. V	Amo	unt (A)		Ì	r. 3 and 4)			or Indired (I) (Instr. 4)	Indirect (Instr.			
Common	1 Stock		03/26/2008				M		375,0	000 A	\$ 0.1	.3 813	3,500			D		
Common	Common Stock 03		03/26/2008				G	V	60,00	00 D	\$ 0	753	3,500			D		
Common Stock 0		03/26/2008				G	V	15,00	00 A	\$ 0	190),511			I	By Sp	ouse	
Common	Common Stock											91,	91,257		I	I	Ву 40	By 01(k)
D	Papart on a																	
Keminder:	Report on a	separate line for eac	Table II -	Derivat	ive S	Securiti	ies Acqu	Pers in th disp ired, Di	ons w is forr lays a	n are no curren of, or B	ot requ ly valid eneficia	ired to d OMB ally Ow	respond control r	unless the	tion contai e form	ned SE	C 147	4 (9-02)
			Table II -	Derivat (e.g., pu	ive S	Securiti alls, wa	ies Acqu	Pers in th disp ired, Di options,	ons wis form lays a sposed	of, or B	ot requally valid eneficial curities	ired to d OMB ally Own	respond control r	unless the	e form		C 147	
1. Title of	2. Conversion	3. Transaction	Table II - 3A. Deemed Execution Date, if	Derivat (e.g., pu 4. Transac Code	ive S ts, ca tion	Securiti alls, wa 5. Nun	ies Acqu arrants, aber of tive ties red (A) posed	Pers in th disp ired, Di options,	ons wis formulays a sposed convertise conver	of, or B	eneficia curities 7. 1 of 1	ired to d OMB ally Own	respond control r ned	unless the number.	9. Number Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owner Form Deriv Secur Direct or Inc (s) (I)	ership of ative ity: t (D)	4 (9-02) 11. Nature of Indirect Beneficial Ownership (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II - 3A. Deemed Execution Date, if any	Derivat (e.g., pu 4. Transac Code	ive S tts, ca	5. Nun Deriva Securit Acquir or Disp of (D) (Instr.	ies Acquarrants, aber of tive ties red (A) posed 3, 4,	Persin the disportions, 6. Date Expirati	ons wis formal ays a sposed convertible. Exercise on Date Day/Yo	of, or B	eneficia eneficia curities) 7. T of V Sec (In:	ally Own Title and Underly curities str. 3 an	respond control r ned	8. Price of Derivative Security	9. Number Derivative Securities Beneficially Owned Following Reported	of 10. Owner Form Deriv Secur Direct or Inc	ership of ative ity: t (D)	11. Nature of Indirect Beneficial Ownership

Reporting Owners

D (O N /411	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
BUPP DAVID C							
425 METRO PLACE NORTH	X		CEO and President				
SUITE 300	Λ		CEO and I resident				
DUBLIN, OH 43017							

Signatures

William J. Kelly, Jr., Attorney-In-Fact	03/28/2008
Signature of Reporting Person	Date

Explanation of Responses:

- * 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).

 $Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, {\it see}\ Instruction\ 6 for procedure.$

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.