FORM 4

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

Washington, D.C. 20549

OMB APPROVAL						
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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

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*  COHEN GARY M					2. Issuer Name and Ticker or Trading Symbol BECTON DICKINSON & CO [ BDX ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) C/O BECTO	(First	) (ISON AND COM	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/06/2006								X	Director 10% Owner  X Officer (give title Other (specify below)  President - BD Medical					
1 BECTON DRIVE				4	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) FRANKLIN LAKES	NJ 07417													X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State	e) (.	Zip)																
		ī	able I - No	n-Deriva	ative S	Secur	ities Ac	quired, l	Disp	osed of	f, or	Benefi	cially Ow	ned					
Da			Date	onth/Day/Year) if any		Execution Date,		3. Transaction Code (Instr. ) 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			nd 5) Securities Beneficially Following I		Form	nership : Direct (D) direct (I) : 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock				11/06/	6/2006		М		48,148		A	\$35.06	93,210			D			
Common Stock				11/06/	06/2006		S		48,14	18	D	\$72.01(1)	45,062		D				
Common Stock 11				11/06/	06/2006		М		1,692	2	A	\$32.49	46,7	754	54 D				
Common Stock													14,80	14,808(2)		I	SIP Trust		
			Table II -							sed of, o				ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Yo	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable at Expiration Date (Month/Day/Year)			7. Title and Amou Securities Underl Derivative Securit 3 and 4)		lerlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	ion(S)	1(3)		
Employee Stock Option (right to buy)	\$35.06	11/06/2006		М			48,148	01/25/2001	(3)	01/25/2009		mmon stock	48,148	\$0	0		D		
Employee Stock Option (right to	\$32.49	11/06/2006		M	М		1,692	11/27/2002 <sup>(4)</sup>		11/27/2011 Common Stock		1,692	\$0 77,308		)8	D			

## **Explanation of Responses:**

- 1. The reported sale price reflects an average price for eleven separate transactions. The actual sales prices for the transactions ranged from \$71.01 through \$72.10.
- 2. Represents shares of common stock held under the Becton, Dickinson and Company Savings Incentive Plan (the "SIP"). The information presented for the SIP is as of October 31, 2006.
- $3.\ The\ option\ became\ 50\%\ exercisable\ on\ January\ 25,\ 2001\ and\ fully\ exercisable\ on\ January\ 25,\ 2002.$
- 4. The option became exercisable in four annual installments beginning November 27, 2002.

## Remarks:

Patricia Walesiewicz, by power of 11/08/2006 attorney for Gary M. Cohen \*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).