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

Name and Address of Reporting Person* <u>Sichak Stephen</u>					BE	2. Issuer Name and Ticker or Trading Symbol BECTON DICKINSON & CO [ BDX ] 3. Date of Earliest Transaction (Month/Day/Year)									ationship of F k all applicab Director	le)	Person(	10% Ov		
(Last)	(First)	(Mi	ddle)			11/25/2011								X	Officer (g below)	Officer (give title below)			specify	
C/O BECTON, DICKINSON AND COMPANY															Senior Vice President					
1 BECTON DRIVE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														X		,	•	ng Person ne Reportin	g Person	
FRANKLIN LAKES	NJ	07	417																	
(City)	(State)	(Zi	p)																	
		Та	ble I - Nor	า-Dei	rivativ	e Se	ecuritie	s Acq	uired, l	Disp	osed of,	, or E	Benefi	cially Ov	vned					
Date					h/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount		(A) or (D)	Price	(Instr. 3 and 4)				(Instr. 4)		
Common Stock 11/2					25/201	25/2011			A		476(1)		A	\$ <mark>0</mark>	13,635			D		
Common Stock 11/2:					25/201	25/2011		F		606(2)		D	\$ <mark>0</mark>	13,029		D				
Common Stock														2,67	2,678(3)		I	SIP Trust		
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 Date (Month/Day/Year) Price of Derivative Security  3. Transaction Date Execution Date, if any (Month/Day/Year)			Execution Date, if any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Dat (Month/Day/Ye		te	Secu	7. Title and Amou Securities Underl Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	Ownershi Form: Iy Direct (D) or Indirec (I) (Instr. 4	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A) (D)				Expiration Date			or Number of Shares							

## Explanation of Responses:

- 1. Represents shares vesting under performance units granted on November 25, 2008.
- 2. Represents shares withheld for payment of withhelding taxes in connection with vesting of the performance units referred to in footnote (1) and the vesting of restricted stock units granted on November 25, 2008.
- 3. 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, 2011.

## Remarks

Patricia Walesiewicz, by power of attorney for Stephen Sichak 11/29/2011

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.