	FORM 3				IES AND EXCHANGE COMMISSIngton, D.C. 20549	ION	OMB A	PPR	OVAL		
(Print or Type Responses)			INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES			OMB Number: 3235-0104					
				Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,					Expires: January 31, 2005 Estimated average burden hours per response 0.5		
l.	Name and Address of Reporting Pers		rson*	Date of Event Requiring     Statement     (Month/Day/Year)	4. Issuer Name and Ticker or Tra	ding Symbol					
_	Scarbrough	Elizabeth	A	November 14, 2002	MacroPore Biosurgery, Inc.						
	(Last)	(First)	(Middle)	3. IRS Identification Number of Reporting Person, if an entity (voluntary)	Director	10% Own	(s) to Issuer (Check all applicable)  10% Owner Other (specify below)		6. If Amendment, Date of Original (Month/Day/Year)		
_	674	40 Top Gun Street		_	X Officer (give title below)						
	San Diego	(Street) CA	92121	_	V.P. Marketing & I	Development / Biologics		7.	Individual or J		
	(City)	(State)	(Zip)						X Form f Reporting Per Form file One Reporting	son ed by I	More than
				Table I — Non-Do	erivative Securities Beneficially Own	ned					
	Title of Security (Instr. 4)			Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirec (Instr. 5)	ct (I)	Ben		ndirect Ownership		
				NTAINED IN THIS FORM ARE	O RESPOND TO THE COLLECTI NOT REQUIRED TO RESPOND NTLY VALID OMB CONTROL N	UNLESS THE FORM	·N				
			Table II —	Derivative Securities Beneficially	Owned (e.g., puts, calls, warrants,	options, convertible sec	ırities)				
						4. Conversion or Exercise Price of		Deriva Direct	ship Form of tive Security: (D) or Indirect tr. 5)	6.	Nature of Indirect Beneficia Ownershi (Instr. 5)
	Title of Derivativ Security (Instr. 4)		te Exercisable and onth/Day/Year)	1	Underlying Derivative Security (Instr. 4)	Derivative Security		(1) (1118			(IIIsti. 5)
	Security	(M	onth/Day/Year)	1		Derivative Security		(1) (IIIS			(msu. 3)

eminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.	
planation of Responses:	
/s/ Elizabeth Scarbrough	November 15, 2002
**Signature of Reporting Person	Date
if the form is filed by more than one reporting person, see Instruction E(h)(v)	
if the form is fried by more than one reporting person, see institution 3(0)(v)	
If the form is filed by more than one reporting person, <i>see</i> Instruction 5(b)(v)  Intentional misstatements or omissions of facts constitute Federal Criminal Violations. <i>See</i> 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).	