

NovaBay Pharmaceuticals, Inc.
 Form 3
 October 24, 2007

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

| | | | | |
|---|--|--|--|--|
| 1. Name and Address of Reporting Person * Â Freiman Paul E. (Last) (First) (Middle) | 2. Date of Event Requiring Statement (Month/Day/Year) 10/24/2007 | 3. Issuer Name and Ticker or Trading Symbol NovaBay Pharmaceuticals, Inc. [NBY] | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) | 5. If Amendment, Date Original Filed(Month/Day/Year) |
|---|--|--|--|--|

C/O NOVABAY
 PHARMACEUTICALS,
 INC., Â 5980 HORTON
 STREET, SUITE 550
 (Street)

EMERYVILLE, Â CA Â 94608
 (City) (State) (Zip)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

| 1. Title of Security (Instr. 4) | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|------------------------------------|--|---|--|
| Common Stock | 25,000 | I | By the Paul Freiman and Anna Mazzuchi Freiman Trust |

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

SEC 1473 (7-02)

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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | | | | | |
|---|---|--|---------------|--------------|----------------------------------|
| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date | 3. Title and Amount of Securities Underlying | 4. Conversion | 5. Ownership | 6. Nature of Indirect Beneficial |
|---|---|--|---------------|--------------|----------------------------------|

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| (Month/Day/Year) | | | Derivative Security (Instr. 4) | | or Exercise Price of Derivative Security | Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5) | Ownership (Instr. 5) |
|--------------------------------------|--------------------|------------|-----------------------------------|--------|---|--|-------------------------|
| Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Option (right to buy) ⁽¹⁾ | 07/01/2002 | 12/31/2011 | Common Stock | 30,000 | \$ 0.2 | D | Â |
| Option (right to buy) ⁽¹⁾ | 04/15/2003 | 12/15/2013 | Common Stock | 20,000 | \$ 0.3 | D | Â |
| Option (right to buy) ⁽¹⁾ | 05/01/2004 | 04/30/2014 | Common Stock | 45,000 | \$ 0.56 | D | Â |
| Option (right to buy) ⁽²⁾ | 05/24/2006 | 05/23/2016 | Common Stock | 45,000 | \$ 1.7 | D | Â |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|---|---------------|-----------|---------|-------|
| | Director | 10% Owner | Officer | Other |
| Freiman Paul E. C/O NOVABAY PHARMACEUTICALS, INC. 5980 HORTON STREET, SUITE 550 EMERYVILLE, CA 94608 | Â X | Â | Â | Â |

Signatures

/s/ Jason R. Wisniewski, Attorney-in-Fact for Paul E. Freiman 10/24/2007

**Signature of Reporting Person
Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).

- (1) Granted pursuant to the Issuer's 2002 Stock Option Plan.
- (2) Granted pursuant to the Issuer's 2005 Stock Option Plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, 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.