FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

washington, D.C. 20049	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-02		

87 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).

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*     Sanzone Virginia Ruth					2. Issuer Name and Ticker or Trading Symbol  ICU MEDICAL INC/DE [ ICUI ]										(Ch	eck all a Dir	ationship of Reportin all applicable) Director Officer (give title		ng Person(s) to issu 10% Owr Other (sp		ner	
(Last) 951 CAI	(Last) (First) (Middle) 951 CALLE AMANECER						3. Date of Earliest Transaction (Month/Day/Year) 02/05/2018											below) below)  VP, General Counsel				
(Street) SAN CLEMENTE CA 92673  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(Oity)				n Dorive	a tive			ioo A		#ad F				Do:	oficial	ls / Osar						
1. Title of Security (Instr. 3) 2. T			2. Transa Date	2. Transaction			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)				5. A Seci Ben Owr	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										Code	v	Amount	()	A) or D)	Price	Transa (Instr.		ion(s)			(	
Common Stock <sup>(1)</sup> 02/0					/2018	/2018				M		1,15	7	Α	\$0.0	0 1,1		157		D		
Common Stock				02/05	/2018	В				F		427		D	\$0.0	730		30	D			
		ו	able II -	Derivat (e.g., pu												Owne	ed					
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, T	4. Transaction Code (Instr. 8)		n of I		Expi	ate Exer iration E nth/Day/	Date	Amount of			8. Price of Derivative Security (Instr. 5)	ive y	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owne Form Director Ind (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Co	Code	v	(A)	(D)	Date Exer	e rcisable		opiration ate	Title		Amount or Number of Shares							
Common	\$0.0 <sup>(2)</sup>	02/05/2018			м			1.157		(3)	02	/05/2019	Comm	on [	1 157	\$0.0	I	1,157	. 1	D		

## **Explanation of Responses:**

- 1. These securities are Restricted Stock Units.
- 2. There is neither a purchase price nor an exercise price for the Restricted Stock Units.
- 3. One third of the units subject to the award shall vest on each of the first, second, and third anniversaries of the grant date.

By: Paula Darbyshire For: 02/07/2018 Virginia Sanzone

\*\* 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.