## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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 <sup>*</sup> OBRIEN FRANCIS J						2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ ICUI ]									elationshi eck all app Direc	olicable)	g Person(s) to 10% (	lssuer Dwner	
(Last)	(Fi	st) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/29/2005										belo	,	below	(specify )	
C/O ICU												Chief Finar	cial Officer						
951 CALLE AMANECER						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street)															X Form filed by One Reporting Person				
SAN CLEME	AENTE CA 9267.		92673												Form Pers	•	e than One Re	porting	
(City)	(Si	tate) (	Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) Date (Month/Day					Execution Date,			Transaction Dispo Code (Instr. and 5		urities Acquired ( sed Of (D) (Instr. : )			5. Am Secur Benef Owner Follow	icially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amou	unt (A) or (D)		Price	Repor Trans		(11504)	(	
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 or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Executio if any (Month/	on Date,	4. Transac Code (In 8)		n Number		5. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amou		3	. Price If Derivative Security nstr. 5)	9. Number o derivative Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		piration te	Title	or Num of Shar	ber					
Bonus Award	(1)	01/29/2005			Α		<b>0</b> <sup>(1)</sup>		(1)		(1)	Common Stock	<b>1</b> 0(	1)	\$0 <sup>(1)</sup>	<b>0</b> <sup>(1)</sup>	D		

#### Explanation of Responses:

1. The reported bonus award entitles the reporting person to receive, on the sixth anniversary of the date of the award, cash in the amount of \$500,000, subject to certain conditions. If, between the date of the award and the payment date, (A) the market price of the common stock equals or exceeds \$50 per share for 10 consecutive trading days, the amount payable at the payment date will be \$750,000, or (B) if the issuer's market capitalization equals or exceeds \$1 billion for 10 consecutive trading days, the amount payable at the payment may be accelerated if the current chief executive officer of the issuer ceases to be the chief executive officer.

#### <u>By: Lynn DeMartini For:</u> Francis J. O'Brien

02/01/2005

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.