## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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> BRUMMETT BURCAR ALISON						2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ICUI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
(Last) (First) (Middle) 951 CALLE AMANECER					3. Date of Earliest Transaction (Month/Day/Year) 02/01/2012								A belo	,	Other below Product Deve	′	
(Street) SAN				- 4. lf /	4. If Amendment, Date of Original Filed (Month/Day/Yea						ar)		ne)	,			
CLEMENTE CA			92673	-									Form Pers		e than One Re	porting	
(City) (State) (Zip)   Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) (Month/Day				action	ion 2A. Deem Execution			3. Transaction Code (Instr. and 5)		curities A osed Of (I	urities Acquired (A sed Of (D) (Instr. 3,		or 5. Am Secur	ount of ities icially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	V Amo		A) or D)	Price	Reported		(1130.4)	(1130.4)	
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. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (li 8)		Number I		6. Date Exercisable an Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Becurities 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 Exercisable	Expiratio Date	n Title	Amo or Num of Sha	nber					
Non- Qualified Stock Option (right to buy)	<b>\$</b> 46.53	02/01/2012	02/01/2012	A		9,421		(1)	02/01/202	2 Commo Stock	<sup>n</sup> 9,4	21	<b>\$</b> 46.53	9,421	D		
Non- Qualified Stock Option (right to buy) <sup>(2)</sup>	(3)	02/01/2012		A		999(4)		(5)	02/01/201	3 Commo Stock	<sup>n</sup> 999	9(4)	<b>\$</b> 0.0 <sup>(3)</sup>	999 <sup>(4)</sup>	D		

## Explanation of Responses:

1. Options vest and are exercisable as to 25% of the underlying grant one year after the date of grant and in equal monthly installments thereafter for three additional years.

2. These securities are Restricted Stock Units.

3. There is neither a purchase price nor an exercise price for the Restricted Stock Units.

4. If the Company's adjusted TSR for 2012 is equal or greater than the 33d percentile of the peer companies (but less than 50%), 50% of the shares covered by the RSUs would be earned; if adjusted TSR for the Company is equal or greater than the 75th percentile of the peer companies, 200% of the shares shown above for the RSUs would be earned. Vesting of any amount earned would be 33% on the anniversary date of the award; 33% of the award two years after grant, and the remaining 33% a year later, with the employee having to be employed by the Company at the time the award was earned and at the time of any vesting.

5. Vesting of any amount earned would be 33% on the anniversary date of the award; 33% of the award two years after grant, and the remaining 33% a year later, with the employee having to be employed by the Company at the time of any vesting.

> By: Lynn DeMartini For: Alison D. Burcar Date

\*\* Signature of Reporting Person

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

\* 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).

02/03/2012

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.