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

Name and Address of Reporting Person*  LOPEZ GEORGE A					Issuer Name and Ticker or Trading Symbol     ICU MEDICAL INC/DE [ ICUI ]      Date of Earliest Transaction (Month/Day/Year)									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner  Office (size title						
(Last)							06/08/2015									Officer (give tit below)		Othe belo	er (specify w)	
951 CALLE AMANECER				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SAN CLEMEN	·													X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Z	ip)																	
		Table	e I - Non-Deriv	ative S	ecu	rities	Acq	Juir	red, [	Disposed	of, o	r Be	eneficia	lly (	Owne	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea				2A. Deemed Execution Da if any (Month/Day/)		Date, Tra		Fransaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				Se Be	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	9	v .	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)		(50. 4)		(111341. 4)		
Common	06/08/2015				S			10,000	D	D \$96.2434 <sup>0</sup>		1,035,844		I		by Partnership				
Common Stock													400,716		D					
	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. 5. Nui Fransaction of Code (Instr. Deriva				oiration	xercisable an n Date ay/Year)	Am Sec Un De Sec	Fitle a lount curitie derlyi rivativ curity nd 4)	of es ing ve (Instr.	of Deriv Secu	f erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownershi Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
				Code	v	(A)	(D)	Dat Exe		Expiration le Date	n Tit	1	Amount or Number of Shares							

## Explanation of Responses:

1. The price recorded in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$95.67 to 96.65, inclusive. The reporting person undertakes to provide ICU Medical, Inc., any security holder of ICU Medical, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this Form 4.

By: Lauren Tarquin For:
George A. Lopez, M.D.

\*\* Signature of Reporting Person

06/08/2015

Date

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).

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.