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*  CONNORS JOHN J					2. Issuer Name and Ticker or Trading Symbol  ICU MEDICAL INC/DE [ ICUI ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last)					3. Date of Earliest Transaction (Month/Day/Year) 05/16/2003									Offic	Officer (give title below)		Other (specify below)		
(Street) (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year) 05/16/2003								6. Lin	ie) X Form Form	<b>'</b>				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/					Execution Date,			Transaction Disposed Code (Instr. and 5)			rities Acquired ( ed Of (D) (Instr. 3			Secur	icially d	6. Ownersh Form: Direct (D) or Indirect (I) (Instr. 4)			
								Code	v	Amount	Amount (A) or (D)		Price	Repor Trans		(111341 . 4)	(111341. 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. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		tr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ect (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	or Num of Shar	ber						

## Explanation of Responses:

- 1. Not a new transaction. Filed for the sole purpose or supplying the date as provided by the SEC. In fact, no date applies.
- 2. Transaction reported on Form 4 filing dated 05-16-2003 which this Form 4 filing amends.

<u>/s/ John J. Connors</u> <u>05/21/2003</u>

\*\* Signature of Reporting Person 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.