FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	L OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average	Estimated average burden						
houre per reenonce	. 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

1. Name and Address of Reporting Person* <u>Voigtlander Christian B.</u>			2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ICUI]							(Ch	Relationship o eck all applica Director	able)	g Pers	on(s) to Issu 10% Ow Other (s	/ner			
(Last) 951 CAL	(F LE AMAN	irst) IECER	(Middle)	•	3. Date of Earliest Transaction (Month/Day/Year) 01/17/2020							below)	r (give title) Chief Operatii		below)	респу		
(Street) SAN CLEME	NTE C.	A	92673	-	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	dividual or Joint/Group Filing (Check Applicable) K Form filed by One Reporting Person Form filed by More than One Reporting Person				1			
(City)	(S	tate)	(Zip)		1 513511													
		Tal	ble I - Nor	n-Deriva	ative	Sec	curit	ties Acc	quired,	Dis	posed of	, or Ber	eficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4)		d (A) or r. 3, 4 and	5. Amour Securities Beneficia Owned For Reported	s For		orm: Direct D) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership						
						Code	v	Amount (A) (D)		Price	Transacti (Instr. 3 a	on(s)			(Instr. 4)			
Common	Stock ⁽¹⁾			01/17/	/2020				M		5,334(2) A	\$0.0	9,1	.66		D	
Common	Stock			01/17/	/2020				F		2,845	D	\$0.0	6,3	321		D	
			Table II -								osed of, onvertib			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date,	Code (Instr.		on I	Derivative E		Expiratio	6. Date Exercisable and Expiration Date Month/Day/Year)		7. Title an Amount of Securities Underlyin Derivative (Instr. 3 a	of S g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Co	ode V		(A)		Date Exercisal		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)			
Common Stock ⁽¹⁾	\$0.0 ⁽³⁾	01/17/2020		N	М			1,778 ⁽²⁾	01/17/202	20 ⁽⁴⁾	12/31/2019	Common Stock	5,334	\$0.0	0		D	

Explanation of Responses:

- 1. These Securities are Performance-based Restricted Stock Units (PRSU).
- 2. Each PRSU reflects the contingent right to receive a variable number of shares of common stock based on achieving performance goals. At the determination date, based on certification of the achievement of the performance criteria, the reporting person earned 300% of the target award amount.
- 3. There is neither a purchase price nor an exercise price for the PRSUs.
- 4. These PRSUs were granted on March 27, 2017. The vesting for this performance-based restricted stock unit ("PRSU") award was dependent upon the achievement of a minimum Cumulative Adjusted EBITDA over the Fiscal Years 2017-2019. The reporting person was able to earn PRSUs ranging from 100% to 300% of the target award amount.

By: Paula Darbyshire,

Attorney-In-Fact For: Christian 01/21/2020

B. Voigtlander

** 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.