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					2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ICUI] 3. Date of Earliest Transaction (Month/Day/Year)										Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner Officer (give title Other (specif					
(Last)	(Fir	,	Middle)	03/15	03/15/2017										belov	ν.Ο	е	belo	` '	
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 CLEMENTE CA 92673														X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Z	Zip)																	
		Tabl	e I - Non-Deriv	ative S	ecu	ritie	s Acq	uired	, Dis	posed	of, c	or Be	neficia	lly	Owne	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date if any (Month/Day/Ye			3. Trans Code 8)	ction Disposed Of				cquired (A) or 0) (Instr. 3, 4 and 5)			5. Amou Securiti Benefici Owned Followii	es For ially (D) Ind		vnership n: Direct r ect (I) r. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	Amount or		A) or D)	Price			Reported Transaction(s) (Instr. 3 and 4)		(,		, , ,		
Common Stock 03/15/2017							P		12	,000	A	A \$155.603		5(1) 577,716		,716	D			
Common Stock														986,843		I		by Partnership		
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. 3. Transaction Date Execution Date, (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) 8)						Expiration Date (Month/Day/Year)			Ar Se Ur De Se	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (D or Indire (I) (Instr. 4)	Beneficial Ownership		
				Code	v	(A)	(D)	Date Exercis	able	Expiratio Date		0 N 0	Amount or Number of Shares							

Explanation of Responses:

1. Reflects a weighted-average purchase price of \$155.603454 per share, at prices ranging from \$155.325 - \$155.85.

By: Paula Darbyshire,
Attorney-in-fact For: George 03/16/2017
A. Lopez, M.D.

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).