FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
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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

Name and Address of Reporting Person* SWINNEY ROBERT S					2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ICUI]											ip of Reporting Per plicable) ctor		on(s) to I	
(Last)	`	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 10/19/2011										Officer (give title below)			Other (specify below)	
951 CAI	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street) SAN CLEME	NTE CA	A 9	92673		 							X		m filed by One Reporting Person m filed by More than One Reporting son					
(City)	(Si	tate) (Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				Execution Date,				Code (Instr. and 5)					3, 4 Secur Bene Owne		icially d		ct (I)	7. Nature of Indirect Beneficial Ownership	
								Co	ode	v	Amou	unt (A) or (D)		ice	Repor Trans	Following Reported Transaction(s) (Instr. 3 and 4)		4)	(Instr. 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)	ative Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any				Fransaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		of Der Sec	Price ivative urity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow Fo Dir or (I) 4)	vnership rm: rect (D) Indirect (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exerci	isable	Exp Date	iration	Title	Amoun or Numbe of Shares	er					
Non- Qualified Stock Option (right to buy)	\$39.38	10/19/2011	10/19/2011	A		1,500		10/19/	/2012	10/1	9/2021	Common Stock	1,500) \$3	39.38	1,500		D	

Explanation of Responses:

By: Lynn DeMartini For: Robert S. Swinney, M.D.

10/19/2011

** 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).