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 [*] SWINNEY ROBERT S						2. Issuer Name and Ticker or Trading Symbol <u>ICU MEDICAL INC/DE</u> [ICUI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last)) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 04/16/2004									Х	Director Officer (give title below)		(10% Owner Other (specify below)		
C/O ICU MEDICAL 951 CALLE AMANECER						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SAN CA 92673 CLEMENTE				-												m filed by One Reporting Person m filed by More than One Reporting son					
(City)	(S	tate) (Zip)																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) Date (Month/Day						Execution Date,			Code	Transaction Code (Instr.		4. Securities Acquired Disposed Of (D) (Instr. and 5)			, 4 Secur		icially d	6. Owner Form: Di (D) or Indirect (rect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code		v	Amou	nt (A) or P		ice	Repor Trans		(Instr. 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Execution if any (Month/		4. Transact Code (In 8)				6. Date Exercisable a Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Sec	rice ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	de V (/		(D)	Date Exercisable		Expiration Date		Title	Amoun or Numbe of Shares	r						
Non- Qualified Stock Option (right to buy)	\$31.195	04/16/2004	04/16/2004		A		1,875		10/16/20)4	04/1	6/2015	Common Stock	1,875	5 \$3	1.195	1,875	I)		

Explanation of Responses:

<u>By: Lynn DeMartini For:</u> <u>Robert S. Swinney, M.D.</u>

04/19/2004

** 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.