## 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 <sup>*</sup> Lamb Scott E						2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ ICUI ]									ationship k all appl Direct	,			
(Last) 951 CA	(Fi LLE AMAN		3. Date of Earliest Transaction (Month/Day/Year) 07/18/2008									Х	below	r (give title ) Secretary,	, Tre	Other ( below) asurer,	specify		
(Street) SAN CLEMENTE CA 92673 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year) 07/22/2008								ine) X	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
1. Title of Security (Instr. 3) (Month/Day					tion	on 2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)		rities Acquired (A) ed Of (D) (Instr. 3, 4		) or 4	5. Amo Securit Benefic Owned Follow Report	ount of 6. C ties For cially (D) ing (Ins red		n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
		т	able II							V Amount (D) Disposed of, or Benefic			neficial	ly C	(Instr.	action(s) 3 and 4)			
1. Title of Derivative Security (Instr. 3)	tle of 2. 3. Transaction 3A. Deemed Execution Date Execution Date (Month/Day/Year) if any			med on Date,	4. 5. Numl Transaction of Code (Instr. 3) Securiti Acquire (A) or Dispose of (D) (Instr. 3 and 5)			iber tive ties ed sed	6. Date Exe Expiration (Month/Day	ble and 7. Title and Amount of		nd of es ng /e	8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		piration ate	Title	Amoun or Numbe of Shares						
Non- Qualified Stock Option (right to buy)	<b>\$</b> 28.39	07/18/2008 <sup>(1)</sup>			A		10,000		07/22/2013	07	/22/2018	Commor Stock	10,000	0 *	\$28.39	10,000		D	

Explanation of Responses:

1. Correction to date and price of option grant; not a new grant.

By: Lynn DeMartini For: Scott E. Lamb

07/29/2008

\*\* Signature of Reporting Person Date

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

 $^{\star}$  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).

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.