FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
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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*  CONNORS JOHN J						2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ ICUI ]									tionship of Reporting all applicable) Director		Ü	Person(s) to Issuer 10% Owner		
(Last)	,	(First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/13/2014									Officer (give title below)		Other (specify below)		
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)  X Form filed by One Reporting Person					
(Street) SAN CLEMEN	NTE CA	9	92673												Form filed by One Reporting Person Form filed by More than One Reporti Person					
(City)	(Sta	ate) (Z	Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye					ear) Ex	Execution Date,			3. 4. Securitie Transaction Code (Instr. 8) 5)					land Secui		ficially d	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price	Re Tra		rted action(s) . 3 and 4)	(Instr. 4)		(msu. 4)	
Common Stock 06/13/201						.4			S		300	D	D \$59.70		2,766		D			
	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)	Execu	Deemed ution Date, / th/Day/Year)		nsaction of Derivat Securit Acquiri (A) or Disposo of (D) (Instr.: and 5)		vative rities rired r osed ) r. 3, 4	6. Date Expiral (Month)	tion [	Year)	7. Title and Amount of Securities Underlying Derivative Security (Instraction 3 and 4)  Amount or Numb of Title Share		8. Pr of Deriv Secu (Inst	vative rity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form: Direct or Inc (I) (In: 4)	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

By: Diana Lansden For: John J. Connors 06/13/2014

\*\* 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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).