FORM 4

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

Washington, D.C. 20549

OMB APPROVAL									
OMB Number: 3235-028									
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* SHERMAN RICHARD MD						2. Issuer Name and Ticker or Trading Symbol  ICU MEDICAL INC/DE [ ICUI ]											olicable)	•	Person(s) to Issuer 10% Owner	
(Last)	` ' ' '					3. Date of Earliest Transaction (Month/Day/Year) 12/09/2013										Officer (give title below)		Other (spe		` '
951 CALLE AMANECER					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					Applicable
(Street) SAN CLEMEN	NTE CA	9	92673													Form filed by One Reporting Person Form filed by More than One Reporting 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/Yea					ar) l	2A. Deemed Execution Date, if any (Month/Day/Year)			3. 4. Securities A Disposed Of (Dode (Instr. 8)						and 5) Secui		ficially ed	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
							de	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)		(111341. 4)		(111301. 4)			
Common Stock 12/09/201					3				S		1,550	D	\$65.41	5.4194(1)		67,273				
	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)	re Conversion or Exercise Price of Derivative Security  Date (Month/Day/Year)  Execution Date, if any (Month/Day/Year)			Code	saction e (Instr.	Derivativ Securitie Acquired (A) or Dispose of (D) (Instr. 3, and 5)			Expiration Date (Month/Day/Year) s s L L L L L L L L L L L L L L L L L			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)  Amount or Number of Title Shares		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct or Indi (I) (Ins 4)	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

1. The price recorded in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$65.16 to \$65.57, inclusive. The reporting person undertakes to provide ICU Medical, Inc., any security holder of ICU Medical, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this Form 4.

By: Lynn DeMartini For: Richard H. Sherman, M.D.

12/09/2013

\*\* Signature of Reporting Person

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> 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).