FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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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* BROWN JACK						2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ICUI]									Relationship of Reporting Person(s) to Issu (Check all applicable) X Director 10% Own					
(Last)	,	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 10/19/2004										er (give title			(specify	
C/O ICU MEDICAL INC 951 CALLE AMANECER						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		i filed by One i filed by Mor on		-		
(City)	(St	ate) (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,			e, Transaction Disp Code (Instr. and			curities Acquired osed Of (D) (Instr. 5)		3, 4 Secur Bene Owne		icially d		ct (I)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amou	nt (A)	or Pr	ice				. 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)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any				4. Transact Code (In 8)		on Number		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Pr of Deriv Secu (Inst	vative irity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisable		oiration te	Title	Amoun or Numbe of Shares							
Non- Qualified Stock Option (right to buy)	\$22.685	10/19/2004			A		1,875		04/19/2005	10/	19/2014	Common Stock	1,875	\$22	685	1,875		D		

Explanation of Responses:

By: Lynn DeMartini For: Jack W. Brown

** 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.

^{*} 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).