FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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

1. Name and Address of Reporting Person [*] KOVALCHIK MICHAEL T						2. Issuer Name and Ticker or Trading Symbol <u>ICU MEDICAL INC/DE</u> [ICUI]									(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last)					3. Date of Earliest Transaction (Month/Day/Year) 10/20/2010										X Director Officer (give title below)			10% Owner Other (specify below)			
951 CAI	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)									
(Street) SAN CA 92673 CLEMENTE																X Form	 Form filed by One Reporting Person Form filed by More than One Reporting Person 				
(City) (State) (Zip)					-																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution Date			, Transaction Code (Instr.				. Securities Acquired (isposed Of (D) (Instr. 3 nd 5)			Secur Benet Owne	ficially d	Form: (D) or Indire	ct (I)	7. Nature of Indirect Beneficial Ownership	
											v	Amou		A) or))	Price	Following Reported Transaction(s) (Instr. 3 and 4)		(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)	e Conversion Date Executi or Exercise (Month/Day/Year) if any			4. Transact Code (In 8)	5. ion Number			6. Date Exercisable Expiration Date (Month/Day/Year)			le and	-1			8. Price of Derivative Security (Instr. 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	v	(A)	(D)	Date Exercisa			iration e	Title	Amount or Number of Shares							
Non- Qualified Stock Option (right to buy)	\$36.6	10/20/2010	10/20/2010		A		1,500		10/20/20	11	10/2	20/2020	Common Stock	¹ 1,5	00	\$36.6	1,500		D		

Explanation of Responses:

By: Lynn DeMartini For: Michael T. Kovalchik, III, M.D.

10/20/2010

** 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.