FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-02								
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

Name and Address of Reporting Person* LOPEZ GEORGE A					2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ICUI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner						
(Last) 951 CAI	(Fi	· ·	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/04/2013											r (give t		O b	ther (s elow)	
(Street) SAN CLEMENTE CA 92673				4	4. If Amendment, Date of Original Filed (Month/Day/Year)								′ .	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Si	tate) (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)	2A. Deem Execution if any (Month/Da		n Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a 5)				5. Amount Securities Beneficially Owned	Form: D (D) or Indirect		irect Indirect Beneficia (I) Ownersh		ect ficial rship	
								С	ode	v	Amount	(A) or (D)	Price		Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)	
Common Stock		09/04/201	3					M		50,000	Α	\$36.02	5	485,20	209		D			
Common	mmon Stock 09/04.		09/04/201	3				F		25,746	D	\$69.96	9.96 459,4		63 D					
Common Stock													1,186,843		I		by Partnership ⁽¹⁾			
		T	able II - Deriva (e.g., p								sposed of , converti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Cod	nsaction le (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration (Month/Day			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		deriva Securi Benefi Owned Follow Repor	ties cially d ving ted action(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	de	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amour or Numbe of Shares	er						
Non- Qualified Stock Option (right to buy)	\$36.025	09/04/2013		N	М			50,000	09/09	9/2005	09/09/2013	Commo Stock	ⁿ 50,00	00	(2)		0	I)	

${\bf Explanation\ of\ Responses:}$

1. Common Stock owned by George A. Lopez M.D. Second Family Limited Partnership. Dr. Lopez holds a one-percent general partnership interest in the Partnership. As general partner, he has the power to vote and power to dispose of the 1,186,843 shares owned by the Partnership and may be deemed to be beneficial owner of such shares. The Partnership acquired the shares on 2/24/99 from Trusts for the benefit of the Lopez children, the Christopher George Lopez Children's Trust and the Nicholas George Lopez Children's Trust, which own a 99% limited partnership in the Partnership. Dr. Lopez is not trustee of and has no interest in the children's Trusts. Except to the extent of his undivided one percent general partnership interest in the assets of the Partnership, Dr. Lopez disclaims any beneficial ownership of the shares owned by the Partnership.

2. Transaction is the exercise of a derivative security; see Column 2.

By: Lynn DeMartini For: George A. Lopez, M.D.

09/04/2013

** 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.

 $^{^{\}star}$ 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).