FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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* LOPEZ GEORGE A					<u>ICU</u>	2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [icui]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last)	,	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/09/2003							X	Officer (give title below)			Other (below)	specify		
C/O ICU MEDICAL													Chairman / Chairman							
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)						
(Street)														X	Form	filed by One	e Rep	orting Pers	on	
SAN CLEME	SAN CLEMENTE CA 92673												Form filed by More than One Reporting Person							
(City)	(SI	tate) (Zip)																	
		Tab	le I - No	on-Deriv	ative S	Sec	urities	Ac	quired, D	isp	osed o	of, or B	enefic	ially	Owne	d				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)						Execution Date,			Transaction Dispose Code (Instr. and 5)			rities Acq ed Of (D)				ties Fo cially (D I In		wnership m: Direct or rect (I) tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code				v	Amoun	int (A) or (D)		ice	Report Transa			u. 4)	(msu. 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) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Ye			Execution Date, if any		4. Transaction Code (Instr. 8)		on of		6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		of De Se (Ir	Price erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownership Form: Direct (D) or Indirec (I) (Instr.	Ownership Form: Direct (D) or Indirect (I) (Instr.	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amou or Numb of Shares	er						
Non- Qualified Stock Option (right to buy)	\$29.265	09/09/2003			P		50,000		(2)	09/	09/2014	Common Stock	50,00	00	(1)	50,000		D		

Explanation of Responses:

- 1. Purchase price is zero; no purchase price applies.
- 2. Options exercisable one-third annually over the first three anniversaries of the grant date.

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

** Signature of Reporting Person Dat

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.