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 [*] SWINNEY ROBERT S					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 10% Owner						
(Last)				3. Date of Earliest Transaction (Month/Day/Year) 04/20/2009									л		er (give title	0		pecify	
951 CALLE AMANECER					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SAN														Form filed by One Reporting Person					
	CLEMENTE CA 92673													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. Transact Date (Month/Day					Execution Date,			Transaction Dis Code (Instr. and			curities Acquired (/ osed Of (D) (Instr. 3 5)		s, 4	Secur Benef Owner	icially d	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amou	nt (A) or) Pr	ice			(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)	tive Conversion Date Execution Date, ty or Exercise (Month/Day/Year) if any				Transaction Numbe Code (Instr. of			6. Date Exe Expiration (Month/Day	Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Secu (Inst	vative	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		Code	v	(A)	(D)	Date Exercisable	Expiratio		Amount or Number of Title Shares		ər						
Non- Qualified Stock Option (right to buy)	\$34.48	04/20/2009	04/20/2009	A		1,500		(1)	04/	20/2019	Commor Stock	1,500) \$34	4.48	1,500	D			

Explanation of Responses:

1. Options exercisable in four equal annual cumulative installments commencing one year after the grant date.

By: Lynn DeMartini For: Robert S. Swinney, M.D.

04/20/2009

** 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.