## 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 <sup>*</sup> KOVALCHIK MICHAEL T					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) 01/30/2008									л		er (give title			(specify
951 CALLE AMANECER					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SAN CA 92673 CLEMENTE														,	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. Transact Date (Month/Day				Execution Date,			Transaction I Code (Instr. a			urities Ac sed Of (D			icially d	6. Owner Form: Di (D) or Indirect	rect	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amou	nt (A	) or ) Pr	rice   T	Repor Trans		(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 of 2. 3. Transaction 3A. Deemed tive Conversion Date Execution Date, if any if any			Date, 1	I. Fransacti Code (In: 3)	5. ion Number			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Prid of Deriva Secur (Instr.	ative ity	9. Number o 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)
				C	Code	v	(A)	(D)	Date Exercisabl		oiration te	Title	Amour or Numbe of Shares	er					
Non- Qualified Stock Option (right to buy)	\$29.77	01/30/2008			A		1,500		(1)	01/	30/2018	Commor Stock	1,500	) \$29.	.77	1,500	I	)	

Explanation of Responses:

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

## By: Lynn DeMartini For: Michael T. Kovalchik, III. M.D. \*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\ast}$  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.