FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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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*  KOVALCHIK MICHAEL T					2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ ICUI ]									ationshi k all app Direc	,					
(Last)	· · · · · · · · · · · · · · · · · · ·					3. Date of Earliest Transaction (Month/Day/Year) 10/19/2004										er (give title		Other (specify below)		
C/O ICU MEDICAL INC 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) SAN CLEME	NTE CA	A 9	92673											X		filed by One filed by Mor on		-		
(City)	(Si	ate) (	Zip)																	
		Tab	le I - No	n-Deriv	ative S	Sec	uritie	s Ac	quired,	Disp	osed	of, or E	Benefi	cially	Owne	ed				
Date			2. Transac Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year			, Transaction Dispo			urities Ac sed Of (D)		3, 4 Secur Bene Owne		icially d	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amou	nt (A) or (D)		rice			(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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transact Code (In 8)			ative ities red sed 3,	6. Date Exe Expiration (Month/Day	Date		and 7. Title and Amount of Securities Underlying Derivative Security (Inst		of Der Sec (Ins	Price rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct or Indi (I) (Inst	: t (D) tirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		oiration te	Title	Amou or Numb of Share	er						
Non- Qualified Stock Option (right to buy)	\$22.685	10/19/2004			A		1,875		04/19/2005	10/	19/2014	Common Stock	1,87	5 \$2	22.685	1,875	I	)		

By: Lynn DeMartini For: Michael T. Kovalchik, III, <u>M.D.</u>

10/20/2004

\*\* 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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).