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

Name and Address of Reporting Person*     BROWN JACK					<u>ICU</u>	2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ ICUI ]									elationsh eck all ap	plicable)	• ( )	Person(s) to Issuer	
(Last)	(Fir	,		3. Date of Earliest Transaction (Month/Day/Year) 06/13/2014										Offic belo	er (give title w)		Other (specify below)		
951 CALLE AMANECER  (Street) SAN CLEMENTE  CA 92673					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. In Line	) K Form Form	ividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
(City)	(St	ate) (Z	Ľip)																
		Tabl	e I - N	Non-Deriv	ative S	Secu	ıritie	s Ac	quired,	Dis	posed o	f, or E	Benef	ficiall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/N					/Year) i	Execution Date,			3. Transaction Disposed Code (Instr. 8)						d Secui	ficially d	6. Ownership Form: Direct (D) or Indirect (I)		
									Code	v	Amount	Amount (A) or		rice	Repo Trans		(Instr. 4)	(msu. 4)	
Common Stock 06/13/20					14		S		3,000	D	\$	59.82	5 1	7,738	D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Exec Security or Exercise (Month/Day/Year) if an			Execu if any	eemed tion Date, h/Day/Year)		ransaction Code (Instr.		vative rities uired rosed ) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instra 3 and 4)		o D S (I	. Price f erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
							Code V (A) (D)		Exercisable Date		Title Shares		es						

Explanation of Responses:

By: Diana Lansden For: Jack W. Brown 06/13/2014

\*\* 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).