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* RIGGS STEVEN						2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ICUI]										Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	(Fi	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/13/2004										X Office below	cer (give title		Other (specify below)		
951 CAI	LLE AMAN	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 For	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. Transacti Date (Month/Day						Execution Date,				Transaction Dis			curities Acquired osed Of (D) (Instr. 5)			Secu Bene Owne	ficially d	For (D) Indi	irect (I)	7. Nature of Indirect Beneficial Ownership	
						Code		v	Amou	nt (A) or (D)		Price	Repo	llowing ported ansaction(s) str. 3 and 4)		str. 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)	curity or Exercise (Month/Day/Year) if any				4. Transact Code (In 8)				6. Date Exercisable a Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	, (1 ((Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code		v	(A)	(D)	Date Exercisa		Expiration Date		Amount or Number of Shares		nber							
Non- Qualified Stock Option (right to buy)	\$33.77	02/13/2004	02/13/2004		A	3,500		(1)		02/13/2015		Common Stock	3,5	00	\$33.77	3,500		D			

Explanation of Responses:

 $1. \ \, \text{Options exercisable one-third annually over the first three anniversaries of the grant date}.$

By: Lynn DeMartini For: Steven C. Riggs 02/13/2004

** 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.