FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
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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 [*] LOPEZ GEORGE A						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) 951 CAI	Last) (First) (Middle) 251 CALLE AMANECER					3. Date of Earliest Transaction (Month/Day/Year) 11/25/2008								X Officer (give title X Other (specify below) below) Chairman / Chairman					
(Street) SAN CLEME (City)	SAN CA 92673				4. lf /	4. If Amendment, Date of Original Filed (Month/Day/Year)								 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person 					
(0.15)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) Date (Month/Day/Ye					/ear) E>	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transacti Code (Ins 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 and 5)			r 5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
								Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 and	ion(s)		, (.,	
Common Stock														1,186,843				by Partno	ership ⁽¹⁾
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execu if any	eemed ition Date, ih/Day/Year)	4. Transac Code (Iı 8)			ivative urities uired or posed D) str. 3, 4	Expiration D (Month/Day/`		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares						
Non- Qualified Stock Option (right to buy)	\$8.1667	11/25/2008			x			19,417	01/01/20)02	01/02/2009	Common Stock	19,417	(2)	16	7,719	D		

Explanation of Responses:

1. Common Stock owned by George A. Lopez M.D. Second Family Limited Partnership. Dr. Lopez holds a one-percent general partnership interest in the Partnership. As general partner, he has the power to vote and power to dispose of the 1,186,843 shares owned by the Partnership and may be deemed to be beneficial owner of such shares. The Partnership acquired the shares on 2/24/99 from Trusts for the benefit of the Lopez children, the Christopher George Lopez Children's Trust and the Nicholas George Lopez Children's Trust, which own a 99% limited partnership in the Partnership. Dr. Lopez is not trustee of and has no interest in the children's Trusts. Except to the extent of his undivided one percent general partnership interest in the assets of the Partnership. Dr. Lopez disclaims any beneficial ownership of the shares on the shares owned by the Partnership.

2. Transaction is the exercise of a derivative security; see Column 2.

George A. Lopez, M.D.	

** Signature of Reporting Person

11/26/2008

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.