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 [*] SAUCEDO JOSEPH R						2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ICUI]									(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	, , , , , ,					3. Date of Earliest Transaction (Month/Day/Year) 08/14/2007											er (give title		Other (specify below)		
951 CALLE AMANECER						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)																- /	Form filed by One Reporting Person				
SAN CLEME	SAN CA 92673 CLEMENTE															Form filed by More than One Reporting Person					
(City) (State) (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 I Code (Instr. a				I. Securities Acquired (Disposed Of (D) (Instr. 3 and 5)			Secur	icially d	Form: (D) or Indire		7. Nature of Indirect Beneficial Ownership	
								c	Code	v	Amou	Amount (A) ((D)		Price	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)	erivative Conversion Date Executity or Exercise (Month/Day/Year) if a			on Date, /Day/Year)	4. Transact Code (In 8)				6. Date Exercisable Expiration Date (Month/Day/Year)							8. Price of Derivative Security (Instr. 5)	9. Number of 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)		
					Code	code V				ate Exp cercisable Dat		iration e	Title	Amount or Number of Shares							
Non- Qualified Stock Option (right to buy)	\$35	08/14/2007			A		8,500		08/1	14/2012	08/1	14/2017	Commo Stock	ⁿ 8,5	00	\$35	8,500		D		

Explanation of Responses:

By: Lynn DeMartini For: Joseph R. Saucedo

08/20/2007

** 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.