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						2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ICUI]									5. Relations (Check all a		olicable)		Person(s) to Issuer		
(Last)	`	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/14/2007										Officer (give title below)			Other (specify below)		
951 CAI	LLE AMAN	IECER			4. If A	men	ndment	, Date	e of O	Original I	Filed	(Month	/Day/Yea	r)	6. Indi	ividual c	or Joint/Group Filing (Check Applicable				
(Street) SAN CLEME	NTE CA	A 9	92673			X Form filed by One Re Form filed by More th 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,				e, Transaction Dispose Code (Instr. and 5)				urities Ac sed Of (D)		3, 4 Secu Bene Owne		icially d	6. Ownership Form: Direct (D) or Indirect (I)	ect	7. Nature of Indirect Beneficial Ownership		
								C	ode	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)	ative Conversion Date ity or Exercise (Month/Day/Year) if any			I. Fransact Code (In B)		n Number		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		of Der Sec (Ins	Price rivative curity str. 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	v	(A)	(D)	Date Exerc	cisable	Exp Date	iration	Title	Amour or Number of Shares	er						
Non- Qualified Stock Option (right to buy)	\$35	08/14/2007			A		8,500		08/14	4/2012	08/1	4/2017	Common Stock	8,500	0	\$35	8,500	D			

Explanation of Responses:

By: Lynn DeMartini For: Jack W. Brown

** 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.

 $^{^{\}star}$ 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).