FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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* FINNEY ELISHA W						2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ICUI]									tionship all appli Directo	,			
(Last) 951 CAI		3. Date of Earliest Transaction (Month/Day/Year) 09/14/2021									Officer below)			Other (s below)	specify				
(Street) SAN CLEMENTE CA 92763						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	Form filed by More than One Reporting Ferson Form filed by More than One Reporting Person				
(City)	(Si	-	(Zip)																
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye					on (Year)	2A. Deemed Execution Date, ar) if any		cquired, Disposed 3. Transaction Code (Instr. 8) 4. Securities Disposed O		Acquired	(A) or		5. Amount of Securities Beneficially Owned Following Reported		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
			Code	v	Amount			(A) or (D)	Price		Transac (Instr. 3	ction(s)			(Instr. 4)				
Non Qualified Stock Options (right to buy) 09/14/202						1		Ì	M		2,424	A	\$101	1.06		l,141		D	
Common Stock 09/14/202)21				S		2,424	D	\$242.20	014(1)	14 ⁽¹⁾ 1,717			D	
		Т	able								sposed of s, converti				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	eemed ution Date, th/Day/Year)	4. Transa Code (8)				Expir	te Exer ration D th/Day/		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
						v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amou or Numb of Share	er					
Non Qualified Stock Options (Iright to buy)	\$101.06	09/14/2021			М			2,424	05/10	6/2017	05/16/2026	Commo Stock		24	\$0.00	0		D	

Explanation of Responses:

1. All sales were sold at the exact price disclosed.

Remarks:

Paula Darbyshire Attorney-infact For: Elisha W. Finney

09/14/2021

** 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.

^{*} 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).