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 [*] <u>RIGGS STEVEN</u>					<u>ICU</u>	2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ICUI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 951 CALLE AMANECER)	3. Date of Earliest Transaction (Month/Day/Year) 12/11/2014										X Officer (give titl below)			Other (specify below) erations		· · ·
(Street) SAN CLEMENTE CA 92673 (City) (State) (Zip)				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indiv ine) X	Form Form	ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) Date (Month/Day/Y					Year) i	Execution Date,			3. Transaction Code (Instr. 8)						4 and Secu		icially d	6. Owne Form: D (D) or Indirect (Instr. 4	irect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Code	v	Amount	(A (D	A) or D)	Price	rice		Reported Transaction(s) (Instr. 3 and 4)		,	(1130.4)	
Common Stock 12/11/20)14	4		S ⁽¹⁾		771		D	\$83.03(2			2,096	D			
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)	rivative Conversion Date E: curity or Exercise (Month/Day/Year) if		Exec if any			saction of (Instr. berivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		vative rities ired r osed) . 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amoun or Numbo Title Sharee		f g nstr. nount umber			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Forn Dire or Ir (I) (II 4)	ct (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

1. Shares purchased through Employee Stock Purchase Plan.

2. The price recorded in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$83.00 to \$83.05, inclusive. The reporting person undertakes to provide ICU Medical, Inc., any security holder of ICU Medical, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this Form 4.

Date

By: Lynn Ehrhart For: Steven 12/12/2014

C. Riggs

** 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.