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*  SWINNEY ROBERT S				<u>ICU</u>	Issuer Name and Ticker or Trading Symbol     ICU MEDICAL INC/DE [ ICUI ]      Date of Earliest Transaction (Month/Day/Year)								Check a	all app Direc	olicable) itor	10%	erson(s) to Issuer	
(Last)	,	,	Middle)		02/04/2009								Officer (give title below)			Other (specify below)		
951 CALLE AMANECER				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							′ I	3. Individ	Applicable				
(Street) SAN													X		•	Reporting Pe		
CLEME	NTE C.	A 9	92673											Pers	•	e triair One re	porting	
(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,			Code (Instr. and 5)				4 8	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amou	unt (A) or (D)		ce T	Repor Frans		(Instr. 4)	(IIIstr. 4)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Security or Exercise (Month/Day/Year)			3A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.		n Number		6. Date Exercisable and Expiration Date (Month/Day/Year)			nd of s ng e (Instr. 3	8. Price of Derivati Security (Instr. 5		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable		oiration e	Title	Amount or Number of Shares						
Non- Qualified Stock Option (right to buy)	\$32.07	02/04/2009	02/04/2009	A		1,500		(1)	02/0	04/2019	Common Stock	1,500	\$32.	.07	1,500	D		

## Explanation of Responses:

 $1.\ Options\ exercisable\ in\ four\ equal\ annual\ cumulative\ installments\ commencing\ one\ year\ after\ the\ grant\ date.$ 

By: Robert S. Swinney, M.D. For: Lynn DeMartini 02/04/2009

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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).

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.