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*     SHERMAN RICHARD MD						2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ ICUI ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				
(Last)	(First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 06/15/2015									Offic belov	er (give title w)	Other below	(specify )		
951 CALLE AMANECER						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	·														X Form filed by One Reporting Person				
SAN CLEME	MENTE CA 92673														Form filed by More than One Reporting Person				
(City)	(Si	tate) (	Zip)																
		Tab	le I - Non	n-Deriv	ative S	Sec	uritie	s A	cquired,	Disp	osed	of, or	Bene	ficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day						Exe if a	A. Deemed execution Date, f any Month/Day/Year		Code (Instr.		4. Securities Acquired Disposed Of (D) (Instr. and 5)			Secur	ities icially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code			v	Amoui	unt (A) or (D)			Repor Trans		(	,,		
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, 1	4. Transact Code (In 8)				6. Date Exercisable a Expiration Date (Month/Day/Year)			d 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		. 3	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.	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
													Amo						
					Code	v	(A)	(D)	Date Exercisable		iration	Title	Num of Shar	.					
Common Stock <sup>(1)</sup>	(2)	06/15/2015			Α		792		06/15/2016	06/1	5/2016	Commo	79	92	(2)	792	D		
Non- Qualified Stock Option (right to buy)	\$94.68	06/15/2015			A		2,914		06/15/2016	06/1	5/2025	Commo	2,9	14	\$94.68	2,914	D		

## Explanation of Responses:

- 1. These securities are Restricted Stock Units.
- 2. There is neither a purchase price nor an exercise price for the Restricted Stock Units.

By: Michelle Lebednik For: Richard H. Sherman, M.D.

\*\* 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.