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

	LCHIK N	of Reporting Persor	ICU 3. Dat	2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ ICUI ]  3. Date of Earliest Transaction (Month/Day/Year)										olicable) etor er (give title	ng Perso	Person(s) to Issuer  10% Owner  Other (specify			
	MEDICAI	LINC	Middle)		4. If Amendment, Date of Original Filed (Month/Day/Year)									belov dividual d	w) or Joint/Group	p Filing (	below) Check A		
951 CAI	LLE AMAN	NECER		]									ine)						
(Street) SAN CLEME	•												Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City)	(Si	tate) (	Zip)																
		Tab	le I - N	on-Deri	vative S	Sec	uritie	s A	cquired, l	Disp	osed	of, or E	Benef	iciall	y Own	ed			
1. Title of	ction ay/Year)	Execu			Code (Ir	tion Dispos		urities Ac sed Of (D)			Secur	icially d	6. Owner Form: D (D) or Indirect (Instr. 4	irect	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amou	nt (A) or (D)		Price	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. Dee Execution if any (Month/		4. Transact Code (In 8)		on Number		6. Date Exer Expiration (Month/Day	Date		Amount of Securities Underlying Derivative Security (Instr. : and 4)		3 O D S (I	Price f erivative ecurity nstr. 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							(D)	Date Exp Exercisable Dat		iration e	Title	Amou or Numb of Share	ber					
Incentive Stock Option (right to buy)	\$34.785	05/16/2005			A		1,875		11/16/2005	05/1	16/2015	Common Stock	1,87	75	(1)	1,875		D	

## Explanation of Responses:

1. Purchase price is zero; no purchase price applies.

By: Lynn DeMartini For:
Michael T. Kovalchik, III,
M.D.

05/17/2005

\*\* 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.