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]											p of Reportir blicable) tor	ng Perso	on(s) to 1 10% C	
(Last)	(Fir	, , ,			3. Date of Earliest Transaction (Month/Day/Year) 04/08/2005									Х	Officer (give title below) Vice President		nt One	Other (specify below)		
C/O ICU MEDICAL INC 951 CALLE AMANECER																				
					4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)															Х	, , ,				
SAN CLEME	NTE CA 92673		2673													Form Pers	filed by Mor on	e than (Dne Rep	orting
(City)	(Sta	ate) (Z	Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) Date (Month/Day/Y				/Year) if any		ition Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				4 and Secu		icially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) (D)		Price		Reported Transaction(s) (Instr. 3 and 4)		(1150.1	•)	(11501: 4)	
Common Stock 04/08/200					005)5			Р		7 A \$2		\$23.1	2 ⁽¹⁾		241	Ι)		
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) Price of Derivative Security		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transac Code (Ir 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y		ate Year)	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amoun or Numbe of		nount	ıt		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	(A)	(D)	Date Exercis	able	Expiration Date	Title	Ni of	umber						

Explanation of Responses:

1. Shares purchased through Employee Stock Purchase Plan

By: Lynn DeMartini For:

Steven C. Riggs

04/08/2005

** 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.