Edgar Filing: ICU MEDICAL INC/DE - Form 4

ICU MEDICAI	L INC/DE										
Form 4 February 27, 20	000										
FORM		OMB APPROVAL									
Check this b	ox		E COMMISSION	Number: Expires:	3235-0287 January 31, 2005						
subject to Section 16. Form 4 or	STATEN	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									
Form 5 obligations may continue.Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19401(b).30(h) of the Investment Company Act of 1940											
(Print or Type Res	ponses)										
1. Name and Address of Reporting Person * SHERMAN RICHARD MD			2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ICUI]				5. Relationship of Reporting Person(s) to Issuer				
							(Check all applicable)				
(Mo				of Earliest T Day/Year) 2008	ransaction		X_ Director 10% Owner Officer (give title Other (specify below) below)				
			Amendment, Date Original Month/Day/Year)			6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person					
SAN CLEME					Form filed by Person	Form filed by More than One Reporting rson					
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Securities A	Acquired, Disposed o	of, or Beneficia	lly Owned		
	Transaction Date onth/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Report	on a separate line	e for each cla	ass of sec	urities benef	-	-	-				
					inform	nation con	spond to the collect tained in this form	are not	SEC 1474 (9-02)		

information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securitie
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired		

	Derivative Security				(A) or Disposed (D) (Instr. 3, and 5)					
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Shares
Non-Qualified Stock Option (right to buy)	\$ 29.77	01/30/2008	А		1,500		<u>(1)</u>	01/30/2018	Common Stock	1,50
Reporting Owners										

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
SHERMAN RICHARD MD 951 CALLE AMANECER SAN CLEMENTE, CA 92673	Х								
Signatures									
By: Lynn DeMartini For: Richa	02	/27/2008							

M.D. <u>**</u>Signature of Reporting Person

Explanation of Responses:

* 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).

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Date