INTUITIVE SURGICAL INC

Form 4

February 08, 2007

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

3235-0287 January 31,

0.5

if no longer subject to

Check this box

Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Expires: 2005 Estimated average

OMB APPROVAL

burden hours per response...

Form 4 or Form 5 obligations

may continue. See Instruction

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 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * MCNAMARA JEROME J

2. Issuer Name and Ticker or Trading Symbol

INTUITIVE SURGICAL INC

5. Relationship of Reporting Person(s) to Issuer

[ISRG]

(Check all applicable)

(Last) (First) (Middle)

(Street)

3. Date of Earliest Transaction (Month/Day/Year)

Director 10% Owner X_ Officer (give title Other (specify below)

950 KIFER ROAD

02/06/2007

Sr. Vice President 6. Individual or Joint/Group Filing(Check

4. If Amendment, Date Original Filed(Month/Day/Year)

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

SUNNYVALE, CA 94086

(City)	(State)	(Zip) Tabl	le I - Non-I	Derivative	Secu	rities Acqu	ired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	ransaction(A) or Disposed of (D) ode (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common			Code V	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock	02/06/2007		M	3,126	A	\$ 11.74	4,459	D	
Common Stock	02/06/2007		M	2,187	A	\$ 18.5	6,646	D	
Common Stock	02/06/2007		M	124 (1)	A	\$ 33.92	6,770	D	
Common Stock	02/06/2007		S	2,013	D	\$ 116	4,757	D	
Common Stock	02/06/2007		S	600	D	\$ 116.01	4,157	D	

Edgar Filing: INTUITIVE SURGICAL INC - Form 4

Common Stock	02/06/2007	S	2,700	D	\$ 116.02	1,457	D
Common Stock	02/06/2007	S	500	D	\$ 115.41	957	D

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

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 control number.

SEC 1474 (9-02)

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 Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number op for Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day/	ate	(Instr. 3 and 4)		8. I Der Sec (Ins
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 11.74	02/06/2007		M	3,126	(2)	02/06/2013	Common Stock	3,126	\$
Stock Option	\$ 18.5	02/06/2007		M	2,187	(2)	02/13/2014	Common Stock	2,187	\$

Reporting Owners

Reporting Owner Name / Address	Keiauonsnips							
	Director	10% Owner	Officer	Other				

MCNAMARA JEROME J 950 KIFER ROAD SUNNYVALE, CA 94086

Sr. Vice President

Signatures

/s/ Jerome J. 02/08/2007 McNamara, Jr.

**Signature of Reporting Date
Person

Reporting Owners 2

Edgar Filing: INTUITIVE SURGICAL INC - Form 4

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) Purchase made pursuant to the 2000 Employee Stock Purchase Plan
- (2) Exercised shares are fully exercisable; remaining option shares vested at 1/48th of total grant per month.

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.