## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STATEME
Section 16. Form 4 or Form 5 obligations may continue. See	
Instruction 1(b).	File

## ENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Samath (Last)	<u>Jamie</u>	*	(Middle)		<u>IN</u>	Issuer Name and Ticker or Trading Symbol NTUITIVE SURGICAL INC [ ISRG ]  Date of Earliest Transaction (Month/Day/Year) 8/15/2014							ck all appli Directo Officer below)	cable) or (give title		10% Ov Other (s below)	ner pecify		
(Street) SUNNY (City)			94086 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Inc Line)	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)							ction 2A. Deemed Execution Date, if any			3. 4. Secur Transaction Dispose Code (Instr. 5)			ired (A	or 5. Amo 4 and Securi Benefi		nt of es ally	Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial Ownership
						,	(Month/Day/Yea		Code	v	Amount	(A) (D)	or P	rice	Owned Following (I) Reported Transaction(s) (Instr. 3 and 4)		(I) (III		(Instr. 4)
	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)	ive Conversion Date Execution Date, y or Exercise (Month/Day/Year) if any				ransaction of Derivat Securit (A) or Disposo of (D) (Instr. 3 and 5)			tive ties red	Expiration Date (Month/Day/Year)  Amount of Securities Underlying Derivative Se (Instr. 3 and 4						3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amo or Num of Sha	.					
Non- Qualified Stock Option (right to	\$459.14	08/15/2014			A		1,562		(1)	0	8/15/2024	Common Stock	1,5	562	\$0.0	1,562		D	

## **Explanation of Responses:**

1. Non-statutory stock option granted pursuant to the 2010 Employee Stock Option Plan. Option shall vest 7/48 one month after the date of grant and 1/48th each month thereafter.

Jamie Samath

08/18/2014

\*\* 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.