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).

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*  Rosa David J.  (Last) (First) (Middle)  1020 KIFER ROAD						Issuer Name and Ticker or Trading Symbol     INTUITIVE SURGICAL INC [ ISRG ]      Jack of Earliest Transaction (Month/Day/Year) 08/29/2022								(Ch	Relationship of Reporting Person(s) to Issuer Check all applicable) Director 10% Owner X Officer (give title below)  EVP Chief Strategy & Growth Of					
(Street) SUNNY (City)		tate) (	94086 Zip)	-Deriva	4. If Amendment, Date of Original Filed (Month/Day/Year)  Ative Securities Acquired, Disposed of, or Benefic								Line	X Form filed by One Reporting Person Form filed by More than One Reporting Person						
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				ction	ction 2A. Deemed Execution Date,			Transaction Dispose 5)		rities Acquired (A) o			5. Amou Securitie Benefici Owned I Reporte Transac	es (D) Following d tition(s)		r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  (e.g., puts, calls, warrants, options, convertible securities)																				
				ransac Code (I	ransaction of ode (Instr. Derivative				6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Amount of Securities Underlying Derivative Se (Instr. 3 and 4						8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
				c	ode	v	(A)	(D)	Date Exerc	isable	Ex Da	piration ate	Title	1	Amount or Number of Shares					
Non- Qualified Stock Option (right to buy)	\$208.9	08/29/2022			A		9,023		(1	1)	08	:/28/2029	Comm		9,023	\$0.0	9,023		D	

## **Explanation of Responses:**

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

By: Donna Spinola For: Rosa, David J

08/29/2022

\*\* 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.