FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C	20549	
vvasiiiiiqtoii,	D.C.	20343	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden hours per response: 0.5									
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

Name and Address of Reporting Person* Laboratory Association				2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
JOHNSO	Johnson Amal M INTOTTVE SORGICAL INC [ISRG]								X	Directo	Director		10% Owner							
(Last) 1020 KI	(F FER ROAL	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/22/2021									Officer below)	(give title		Other (s below)	specify		
					4. If	Amer	ndment	. Date	of Original	Filed	(Month/D	av/Year)		6. Inc	lividual or 3	Joint/Group	Filino	(Check Ap	pplicable	
(Street) SUNNY	VALE C	A	94086			4. If Amendment, Date of Original Filed (Month/Day/Year)								Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	itate)	(Zip)												Persor	1				
		Tab	le I - Nor	-Deriv	ative	Sec	uritie	es A	cquired,	Dis	osed o	of, or B	enefic	cially	/ Owned	d				
Date					Day/Year) if		2A. Deemed Execution Date if any (Month/Day/Yea		Code (I		Dispose	ities Acqu d Of (D) (II		4 and Securit Benefic Owned		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or Pri	ice	Reported Transact (Instr. 3	tion(s)				
Common Stock				04/22	2/2021			М		255	255 A		0.0	3,	3,723		D			
		Т							quired, D s, option						Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	ed Date,	4. Transaction Code (Instr. 8)		5. Number of		6. Date Exercis Expiration Dat (Month/Day/Ye		ble and	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8	B. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		kpiration ate	Title	Amor or Numl of Share	ber						
Non- Qualified Stock Option (right to buy)	\$859.66	04/22/2021			A		557		(1)	04	4/22/2031	Common Stock	55	7	\$0.0	557		D		
Restricted Stock Units	\$0.0	04/22/2021			М			255	(2)	04	1/23/2021	Common Stock	25	5	\$0.0	0		D		
Restricted Stock	\$0.0	04/22/2021			A		185		(2)		(2)	Common	18	5	\$0.0	185		D		

Explanation of Responses:

- 1. 100% of the shares subject to the option shall vest on the earlier of the one year anniversary of the date of grant or the next Annual Meeting of Stockholders, subject to the Reporting Person's continued service as a director to the issuer.
- 2. 100% of the RSUs shall vest on the earlier of the one year anniversary of the date of grant or the next Annual Meeting of Stockholders, subject to the Reporting Person's continued service.

By: Donna Spinola For: Amal M Johnson

04/23/2021

** 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.