FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burden									
l	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.						2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) 1020 KII	(F FER ROAL	(First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 07/24/2015								X Officer (give title Other (specify below) EVP & Chief Commercial Officer				
(Street) SUNNYVALE CA 94086 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)				lon-Deri	vative	Sec	uriti	ies Ad	quired	d, Di	isposed c	of, or Be	eneficia	lly Owne	d					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y					tion	2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 au		(A) or	5. Am Secur Benef Owne	ount of ties cially d Following	Forn (D) o	. Ownership form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		ed ction(s) s and 4)			(Instr. 4)		
Common	Stock	2015	15			М		2,800	A	\$303.2	.7	3,876		D						
Common	2015	.5		S		2,800(1)	D	\$550.19	91	,076		D								
		Т	able I								posed of, converti			y Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code (8)	5. Number of		6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		Ownersh Form: Direct (D) or Indirect (I) (Instr.	Ownership	Beneficial Ownership tt (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa	sable	Expiration Date	Title	Amount or Number of Shares							
Non- Qualified Stock Option (right to	\$303.27	07/24/2015			M			2,800	(2)		02/15/2018	Common Stock	2,800	\$0.0	7,200		D			

Explanation of Responses:

- 1. These options were exercised and the underlying shares sold pursuant to a 10b5-1 trading plan adopted by the reporting person on December 15, 2014.
- 2. Non-statutory stock option granted pursuant to the 2010 Employee Stock Option Plan. The option vests 1/8th six months after the date of grant and 1/48th monthly thereafter.

David J Rosa

07/27/2015

Date

** Signature of Reporting Person

Signature of Reporting Ferson

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

- * 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.