FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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*  SMITH LONNIE M						2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ ISRG ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				
(Last) (First) (Middle) 1266 KIFER ROAD						3. Date of Earliest Transaction (Month/Day/Year) 12/01/2011										cer (give title ow) Chairman	Other below of the Board	(specify )	
(Street) SUNNY (City)	(Street) SUNNYVALE CA 94086					4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
		Tab	le I - Nor	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or l	Bene	ficia	ally Own	ned			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Da		n Date,	Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			(A) or 3, 4 aı	nd Secu Bene	nount of rities ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							v	Amount	(A (C	() or ()	Price	Tran	saction(s) r. 3 and 4)		(111501.4)				
Common Stock 12/01/									J		6,970	)	A	\$(	) 2	83,857(1)	D		
Common Stock 12/01/						l/2011					6,970	)	D	\$(	) 1	20,523(1)	I	by Trust	
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		3A. Deem Execution if any (Month/Da	Date,	4. Transactic Code (Inst		on of		6. Date E Expiratio (Month/D	n Date	•	Amount of		str. 3	8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Code		Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Shar	ber							

## **Explanation of Responses:**

1. Shares were distributed by GRAT No. 5 to the reporting person.

Lonnie M. Smith

12/06/2011

\*\* 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.