FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIA	L OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burd	en
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

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1. Name and Address of Reporting Person st $\underline{\text{Leonard Keith R}}$				2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner								
(Last) 1020 KII	(F FER ROAI	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 04/19/2018								-	Office below	Officer (give title		Other (s below)	specify	
(Street)	treet) UNNYVALE CA 94086				4. 11	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) (State) (Zip)															r GISUII					
		Tab	le I - Non	-Deriv	ative	Sec	curiti	es A	cquired,	Disp	osed	of, or E	enefi	ciall	y Owne	d				
Date			2. Trans Date (Month/I	/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year		e, Transaction Di Code (Instr. 5)		Dispose	ecurities Acquired (A) posed Of (D) (Instr. 3,		4 and Securit Benefic Owned		es ially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	Amount (A) or (D)		rice	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
Common Stock 04/1				04/19	0/2018		M ⁽¹⁾		513	3 A S		\$0.0	513			D				
		Т	able II - I						quired, D s, option						Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Day	Date, Transaction			n of		6. Date Exercisab Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Sec (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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amo or Num of Shar	ber						
Non- Qualified Stock Option (right to buy)	\$462.71	04/19/2018			A		996		(2)	04	/19/2028	Common Stock	99	96	\$0.0	996		D		
Restricted Stock Units	\$0.0	04/19/2018			M			513	(3)	02	/21/2018	Common Stock	51	13	\$0.0	0		D		
Restricted Stock	\$0.0	04/19/2018			A		332		(4)	04	/19/2022	Commo	33	32	\$0.0	332		D		

Explanation of Responses:

Units

- 1. These shares were acquired from the vest and release of an RSU grant previously issued to the Filer.
- 2. Non-statutory stock option granted pursuant to the Non-Employee Directors' Stock Option Plan. Option shall vest 100% one year after the date of grant or at the next Shareholders Meeting, whichever should take place first, provided that vesting will cease on termination of the Directors service to the Company.
- 3. 100% of the grant will vest on the anniversary date of the grant or the next Annual Shareholders Meeting, whichever takes place first, provided however that vesting will cease on termination of the Director's service to the company.
- 4. Restricted Stock Units (RSUs) are granted pursuant to the 2010 Incentive Award Plan. The RSUs fully vest on the first anniversary of the date of grant.

04/19/2018 Keith Leonard

** Signature of Reporting Person

Stock

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.