## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL				
OMB Number:	3235-0287				
Estimated average burd	en				
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*     Myriam Curet						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  Officer (give title V Other (spe					
(Last) (First) (Middle) 1020 KIFER ROAD						3. Date of Earliest Transaction (Month/Day/Year) 02/15/2018									X Officer (give title X Other (specify below)  EVP & Chief Medical Officer / EVP & Chief Medical Officer					
(Street) SUNNY (City)		A State)	94086 (Zip)		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
Table I - Non-Derivati  1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)						ction 2A. Deemed Execution Date,			3. Transa Code (	3. 4. 5 Transaction Dis Code (Instr. 5)			4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			nt of s ally ollowing	Form	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	unt (A) or (D)		Price	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)	
Common	Stock	02/1	.5/2018				M <sup>(1)</sup>		1,000		A	\$0.0	2,9	970	D					
Common Stock 02					/15/2018				F <sup>(1)</sup>		346		D	\$0.0	2,6	524	D			
			Table II -								sed of, onvertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution D if any (Month/Day)	ate,	4. Transa Code ( 8)				6. Date Exercis Expiration Date (Month/Day/Yea		•	7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		Security I 4)	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported	re es ally ig d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title		Amount or Number of Shares		Transaction (Instr. 4)	on(s)			
Non- Qualified Stock Option (right to buy)	\$418.56	02/15/2018			A		6,000		(2)		02/15/2028	Com Sto		6,000	\$0.0	6,000	)	D		
Restricted Stock Units	\$0.0	02/15/2018			M			1,000	(3)	(	02/15/2021	Com Sto		1,000	\$0.0	2,999	)	D		
Restricted Stock Units	\$0.0	02/15/2018			A		4,000		(3)		02/15/2022	Com		4,000	\$0.0	4,000	)	D		

## **Explanation of Responses:**

- 1. On 2/15/2017, RSU shares were granted, vesting 25% per year over a four year period. RSUs convert into common stock on the vest date on a one-for-one basis. On 2/15/18, 25% of the shares were released and a portion of the shares were held back to cover the statutory tax withholding requirement. The net shares were deposited into the holders account.
- 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.
- 3. Each Restricted Stock Unit, granted pursuant to the 2010 Employee Stock Option Plan, represents a contingent right to receive one share of Intuitive Surgical common stock. The grant vests 25% on the first anniversary of the date of grant and annually thereafter, over a four year period of time.

By: Lori Serrano For: Myriam Curet \*\* Signature of Reporting Person

02/16/2018

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.