FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STATE
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

## MENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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*  MOHR MARSHALL					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  Other (specify					
(Last) 950 KIF	(F ER ROAD	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/17/2009								Officer (give title below)  SVP		below)	респу	
(Street) SUNNY (City)			94086 (Zip)	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	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-Deriva  1. Title of Security (Instr. 3)  2. Transar Date (Month/Date)					Execution Date,			3. Transaction	4. Secur	of, or Be ities Acquir d Of (D) (Ins	ed (A) or	5. Amou Securitie Beneficia Owned F	nt of es ally following	Form (D) o	: Direct r Indirect   I str. 4)   (	7. Nature of Indirect Beneficial Ownership	
								Code V	Amount	(A) or (D) Price		Reported Transact (Instr. 3	action(s)		(	(Instr. 4)	
		-	Table II - De (e.					uired, Dis s, options,				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Date, Transaction				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	Beneficial Ownership ct (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Non- Qualified Stock Option (right to	\$107.27	02/17/2009		A		30,000		(1)	02/17/2019	Common Stock	30,000	\$0	30,000	0	D		

## **Explanation of Responses:**

1. Non-statutory stock option granted pursuant to the 2000 Employee Stock Option Plan. Option shall vest 1/8 six months after the date of grant and 1/48th each month thereafter.

Marshall Mohr 02/18/2009

\*\* 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.