FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								

37 Estimated average burden 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* DUGGAN ROBERT W						2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG]											p of Reporting blicable) ctor		o Issuer 6 Owner	
(Last) 950 KIFE	(Fi	rst) (Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/13/2007											Offic belov	er (give title v)	Oth bel	er (specify ow)	
(Street) SUNNYV (City))4086 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indi Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, o	r Be	nefi	cially	Owne	ed			
Date				saction /Day/Year)		2A. Deemed Execution Dat if any (Month/Day/Ye	n Date,	Code (ransaction Disposed code (Instr. 5)		rities Acquired (A) o				Secur Benef Owner	cially d Following	6. Ownershi Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Pr	ice	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock				06/13	3/2007				S		5,000		D	\$	138.7	2	04,511	D		
Common Stock 0				06/13	3/2007				S		5,000		D	\$	138.8	199,511		D		
Common Stock 06/3				06/13	3/2007				S		5,000		D	1	139	194,511		D		
Common Stock																1	2,268	I	By Managed Account	
		Та	ble II - [)								sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 4. Deemed Execution I if any (Month/Day) 4. Month/Day				Date,	Code (Inst		on of		6. Date Exercis Expiration Date (Month/Day/Yea		•	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		of S Og S Instr.	Deri Sec (Ins	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisal		Expiration Date	Titl	OI N Of	umbe							

Explanation of Responses:

Remarks:

/s/ Robert W. Duggan

06/14/2007

** Signature of Reporting Person Date

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

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.

^{*} 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).