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* DUGGAN ROBERT W					2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG]												licable)	ng Person(s) to Is			
(Last) 950 KIFE	(Fi ER ROAD	rst) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/25/2007										Offic belov	er (give title v)		Other (specify below)		
(Street) SUNNY (City)			94086 Zip)		4. If A	4. If Amendment, Date of Original Filed (M							ır)		6. Individual or Joint/Group Filing Line) X Form filed by One Repo Form filed by More than Person					porting Person	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)						ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	((A) or (D)	Price			ed ction(s) 3 and 4)			(Instr. 4)	
Common Stock																12,26			I	By Managed Account	
Common Stock															213,741		13,741	D			
		Та	ıble II - C								sed of, onvertib				y Ov	wned					
1. Title of Derivative Security (Instr. 3)	e Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. 8)				6. Date I Expirati (Month/I	on Dat		7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		str. 3	Deri Secu	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Inst		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	,	(A)	(D)	Date Exercisa		Expiration Date	Title	or	ount nber res							

Explanation of Responses:

Remarks:

/s/ Robert W. Duggan

01/29/2007

** 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.