FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
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

1. Name and Address of Reporting Person*  DUGGAN ROBERT W								2. Issuer Name <b>and</b> Ticker or Trading Symbol  INTUITIVE SURGICAL INC [ ISRG ]										all app	nship of Reporting F applicable) Director		son(s) to Is	
(Last) (First) (Middle) 950 KIFER ROAD							3. Date of Earliest Transaction (Month/Day/Year) 06/13/2006											Office below	cer (give title ow)		Other (specify below)	
(Street) SUNNYVALE CA 94086 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Indiv Line) X	ividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of Security (Instr. 3)  2. Trans: Date (Month/I						ar)   i	2A. Deemed Execution Date, if any (Month/Day/Year)		7	3. Transa Code (I 8)						4 and Secu Bend Own		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										0	Code	v	Amount		(A) or (D)	Pri	ce	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
COMMON STOCK 06/13/						/2006					S		11,23	9	D	D \$1		12,848			I	By managed account
Common Stock																		716,736			D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercis Price of Derivative Security	Date	3. Transaction Date Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr 8)				Exp	Date Ex piration onth/Da	n Date		7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)			Deri Seci (Inst	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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v						Expiration Date	Title	or Nur of	ount nber ires								

Explanation of Responses:

Remarks:

/s/Robert Duggan

06/15/2006

\*\* 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.