FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|
| l | OMB Number: | 3235-0287 | | | | | | | |
| l | Estimated average burden | | | | | | | | |
| l | hours per response: | 0.5 | | | | | | | |

5. Relationship of Reporting Person(s) to Issuer

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

1. Name and Address of Reporting Person

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

| GUTHART GARY S | | | | | | INTUITIVE SURGICAL INC [ISRG] | | | | | | | | eck all applic Directo | or | | ner | |
|---|---|--------------------|---|---------|---|---|---|-----------|---|---------------|------------------------|---|--|---|--|---|--|--|
| (Last) 950 KIF | (F ER ROAD | First) (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/12/2007 | | | | | | | | X Officer below) | | | ther (s elow) | pecify |
| Street) SUNNYVALE CA 94086 | | | | 4. | If Ame | ndment, I | Date | of Origir | nal File | ed (Month/Da | Lin | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | Persor | | e than One | керог | urig | |
| | | Tal | ole I - N | lon-Der | ivativ | e Se | curities | s Ac | quire | d, Di | isposed o | f, or Be | neficial | ly Owned | l | | | |
| 1. Title of Security (Instr. 3) 2. Transport Date (Month/L | | | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and | | | | es ially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | Instr. 4) | | |
| Common Stock 02 | | | | | /12/2007 | | | | M | | 1,916 | A | \$6 | 14 | ,564 | 4 D | | |
| Common Stock | | | | | 02/12/2007 | | | | M | | 12,139 | A | \$18.5 | 26 | ,703 | D | | |
| Common Stock 02. | | | | | /2007 | | | | M | | 3,945 | A | \$18.5 | 30 | ,648 | D | | |
| Common Stock 02/12/20 | | | | | | 007 | | | S | | 8,000 | D | \$110.92 | 76 22 | ,648 | D | | |
| Common Stock 02/12/20 | | | | | | 007 | | | S | | 4,000 | D | \$111.79 | 69 18 | ,648 | D | | |
| Common Stock 02/12/20 | | | | | | 007 | | S | | 2,000 | D | \$112.00 | 45 16 | ,648 | D | | | |
| Common Stock 02/12/20 | | | | | |)07 | | S | | 4,000 | D | \$111.83 | 26 12 | ,648 | D | | | |
| | | | Table I | | | | | | | | posed of, convertil | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | e (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transa Code (8) | | 5. Number | | 6. Date Expira (Month | tion Da | | 7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Own Forn Direc or In (I) (Ir | ership n: ct (D) direct nstr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercis | sable | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Stock Option | \$6 | 02/12/2007 | | | M | | 1,916 | | (1) |) | 12/10/2009 | Common Stock | 1,916 | \$6 | 0 | | D | |
| Stock Option | \$18.5 | 02/12/2007 | | | M | | 12,139 | | (1) |) | 02/01/2012 | Common Stock | 12,139 | \$18.5 | 0 | \top | D | |
| Stock | \$18.5 | 02/12/2007 | | | M | | 3,945 | | (2) |) | 02/13/2014 | Common | 3,945 | \$18.5 | 36,055 | , | D | |

Explanation of Responses:

- 1. All share option grants are vested.
- 2. Exercised shares are fully exercisable; remaining option shares vested at 1/48th of total grant per month.

Remarks:

/s/ Gary S. Guthart

02/13/2007

** 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.