FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

1	W	/as	hing	ton,	D.C.	2054	.9	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
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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

		of Reporting Perso		2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG]								cable) r	g Person(s) to I	Owner		
(Last) 950 KIF	(ER ROAL	First)		3. Date of Earliest Transaction (Month/Day/Year) 01/26/2010								(give title	below Sales & Mktg	(specify		
(Street) SUNNYVALE CA 94086 (City) (State) (Zip)					4. If Ar	4. If Amendment, Date of Original Filed (Month/Day/Year)							lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
		T	ıble I - No	n-Deriv	/ative S	ecurities Ac	quired	, Dis	posed c	of, or Be	neficia	ally (Owned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						2A. Deemed Execution Date, if any (Month/Day/Year	Code	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	v	Amount	(A) or (D)	Price		Transact (Instr. 3 a	ion(s)			
Common	Stock			01/26	5/2010		М		2,604	A	\$106	.69	4,3	389	D	
Common	Stock			01/26	5/2010	2010			2,604	2,604 D		89	1,785		D	
Common Stock 01/26/2						2010			1,000	A	\$112.66		2,785		D	
Common	Stock		5/2010	2010			1,000	D 5		89	1,785		D			
Common	Stock		5/2010		M		6,000	A	\$107	.27	7,785		D			
Common	Stock			01/26	5/2010		S		6,000	D	\$33	89	1,7	785	D	
			Table II -			curities Acq lls, warrants							wned			
1. Title of Derivative Security (Instr. 3)	1. Title of 2. 3. Transaction 3A. Deemed Execution Date Execution Date Security or Exercise (Month/Day/Year) if any C			4. Transactio Code (Inst		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Securities		Der Sed (Ins	rivative curity str. 5)	9. Number derivative Securities Beneficial Owned	Ownershi Form: Direct (D) or Indirect	Beneficial Ownership t (Instr. 4)		

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)				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. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Non- Qualified Stock Option (right to buy)	\$106.69	01/26/2010		M			2,604	(1)	02/07/2016	Common Stock	2,604	\$0	521	D	
Non- Qualified Stock Option (right to buy)	\$107.27	01/26/2010		M			6,000	(1)	02/17/2019	Common Stock	6,000	\$0	39,000	D	
Non- Qualified Stock Option (right to buy)	\$112.66	01/26/2010		М			1,000	(1)	02/15/2017	Common Stock	1,000	\$0	7,708	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.

/s/ Jerome J McNamara 01/27/2010

** 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.