

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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

OMB APPROVAL	
OMB Number:	3235-0287
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1. Name and Address of Reporting Person * <u>MCNAMARA JEROME J</u>  (Last) (First) (Middle) <u>950 KIFER ROAD</u>  (Street) <u>SUNNYVALE CA 94086</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>INTUITIVE SURGICAL INC [ ISRG ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>Sr. Vice President</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>08/18/2005</u>	
		6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> 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. Transaction Date (Month/Day/Year)	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 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Common Stock <sup>(1)</sup>	08/18/2005		M		20,000	A	\$18.5	21,225	D	
Common Stock <sup>(1)</sup>	08/18/2005		M		4,125	A	\$18.5	25,350	D	
Common Stock <sup>(1)</sup>	08/18/2005		M		875	A	\$47.86	26,225	D	
Common Stock <sup>(1)</sup>	08/18/2005		S		20,000	D	\$74.1	6,225	D	
Common Stock <sup>(1)</sup>	08/18/2005		S		4,125	D	\$74.1	2,100	D	
Common Stock <sup>(1)</sup>	08/18/2005		S		875	D	\$74.1	1,225 <sup>(2)</sup>	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. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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
Stock Option	\$18.5	08/18/2005		M		20,000		(3)	02/01/2012	Common Stock	20,000	\$18.5	5,000	D	
Stock Option	\$18.5	08/18/2005		M		4,125		(3)	02/13/2014	Common Stock	4,125	\$18.5	30,875	D	
Stock Option	\$47.86	08/18/2005		M		875		(3)	02/11/2015	Common Stock	875	\$47.86	29,125	D	

**Explanation of Responses:**

- The purpose of this amendment is to (a) correctly report the number of shares and (b) sales price of the issuer's common stock owned by the reporting person following the transactions reported in the original Form 4 filed with the Securities and Exchange Commission on 8/19/2005.
- Includes 447 shares acquired pursuant to the purchase under the Company's Employee Stock Purchase Plan
- All share option grants are vested.

**Remarks:**

/s/ Jerome McNamara 11/03/2005  
 \*\* 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.