FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL OMB Number: 3235-

U									
	OMB Number:	3235-0287							
	Estimated average burden								
	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

											•,	party Act t											
1. Name and Address of Reporting Person* MOLL EDEDEDIC H							2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
MOLL FREDERIC H																X	Direc	ctor		10% O	wner		
(Last) (First) (Middle) 950 KIFER ROAD							3. Date of Earliest Transaction (Month/Day/Year) 09/10/2003										Office	er (give title w)		Other (below)	specify		
							4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable						
(Street) SUNNYVALE CA 94086					Succession of the success											X Form filed by One Reporting Person Form filed by More than One Reporting							
(City) (State) (Zip)																Person					Ŭ		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																							
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						ar) i	2A. Deemed Execution Date, f any Month/Day/Year)		Co	Transaction Code (Instr.					4 and See Be		Amount of curities neficially vned Following		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										de V		Amount	(A) or D)	Price	Trans		action(s) . 3 and 4)			(111511.4)		
Common Stock 09/10/							2003 09/10/200		5	5		5,000		D	\$15	.06	60	662,799		D			
Common Stock 09/10/							/2003 09/10		5	5		5,000		D	\$15.04		657,799			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. Conversior or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transactio Code (Insti 8)		n of		Expir	te Exerc ation Da th/Day/\	ate		7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)			Deriv Secu	Price of ivative curity str. 5)	9. Number or derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Ownership Form:	Beneficial Ownership (Instr. 4)		
			Code	v	(A)	(D)	Date Exerc	cisable		xpiration ate	Title	or Nui of	ount mber ares										

Explanation of Responses:

Frederic H. Moll

09/10/2003

** 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.