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 burd	en
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* SMITH LONNIE M					2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG]									Check all a Dir	ector	ng Pei	10% O	wner		
(Last) (First) (Middle) 950 KIFER ROAD						3. Date of Earliest Transaction (Month/Day/Year) 03/01/2011										icer (give title ow) Chairman of		Other (specify below) the Board		
(Street) SUNNYVALE CA 94086 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X 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. Transa Date (Month/D						Execution Day/Year) if an		A. Deemed Execution Date, fany Month/Day/Year)		Transaction Disposed Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3,			nd Secu Bene	nount of rities ficially ed Following	Forr (D) (6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
											v	Amount		(A) or (D)	Price	Tran	isaction(s) tr. 3 and 4)			(1130.4)
Common Stock 03/0						1/2011	/2011		G		1,500		D	\$	0	407,680		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)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			ansaction of ode (Instr. Derivative		Expiration (Month/D	6. Date Exercisable and Expiration Date Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		,	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
						Code V		(A)	(D)	Date Exercisal		Expiration Date	Title	of itle Shares						

Explanation of Responses:

/s/ Lonnie M. Smith

03/07/2011

** 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.