OMB APPROVAL

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U.S. SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM 4

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

	Section 17(a) of the		ing Company Act of 1935 or Company Act of 1940						
[]	Check box if no longer may continue. See Inst		16. Form 4 or Form 5 obligations						
1.	Name and Address of Reporting Person*								
	Lampropoulos	Fred	Р.						
	(Last) 1600 West Merit Parkwa	(First)	(Middle)						
	South Jordan	(Street) UT	84095						
	(City)	(State)	(Zip)						
2.	Issuer Name and Ticker or Trading Symbol Merit Medical Systems, Inc. MMSI								
3.	IRS Identification Nur	mber of Reporting Pers	con, if an Entity (Voluntary)						
4.	Statement for Month/Year March 5, 2003								
5.	If Amendment, Date of	Original (Month/Year)							
		Page 1 of 3 Page	es						
6.	Relationship of Report (Check all applicable)								
	[X] Director [X] Officer (give to	itle below)	<pre>[X] 10% Owner [] Other (specify below) President, CEO</pre>						
7.	Individual or Joint/Group Filing (Check applicable line)								
	_	ne Reporting Person ore than one Reporting	g Person						

Table I -- Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (mm/dd/yy)	3. Transaction Code (Instr. 8)	Amount	(A) or (D)	Price	of Issuer's Fiscal Year (Instr. 3 and 4)	Indirect (I)	Indirect Beneficial Ownership (Instr. 4)
Common Stock No Par Value	03/05/03	G	1,450	D			D	
Common Stock No Par Value						628,908		
Common Stock No Par Value						29,656(1)		by 401(k) Plan(1)

 $^{^\}star$ — If the form is filed by more than one Reporting Person, see Instruction 4(b)(v).

Reminder: Report on a separate line for each class of $% \left(1\right) =\left(1$

Explanation of Responses:
/S/ FRED P. LAMPROPOULOS

03/05/03

**Signature of Reporting Person

Date

 $\ensuremath{^{**}}$ 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 provided is insufficient, see Instruction 6 for procedure.

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