FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-02							
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

1. Name and Address of Reporting Person*  LAMPROPOULOS FRED P					2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC [ MMSI ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner  Office (All applicable)  Other (All applicable)					
(Last) 1600 W I	(F MARIT PÆ	irst) ARKWAY	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 10/18/2003								X Officer (give title Other (specify below)  President, CEO				
(Street) SO JORDAN UT 84095 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	,			
		Ta	able I - N	on-Deriv	ative	Secu	ıritie	s Ac	quired	d, Di	sposed o	f, or B	enefic	cially	Owne	ed		
Date				Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)				Acquired (A) or (D) (Instr. 3, 4 and		Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	t (A) or Pric			Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock, no par value 11/18/2					2003	3 11/18/2003			S		2,000	D	\$28	\$28.3885		09,408	D	
Common Stock, no par value 11/18/2					2003	03 11/18/2003			S		2,000	D	\$2	\$28.25		07,408	D	
Common Stock, no par value 11/18/20					2003	03 11/18/2003			S		1,835	D	\$28	\$28.3501 7		05,573	D	
Common Stock, no par value 11/18/20					2003	003 11/18/2003			S		1,275	D		(1)		04,298	D	
Common Stock, no par value 11/18/20				2003	003 11/18/2003			S		950	D		(1)		03,348	D		
Common Stock, no par value 08/08/19					1988	988 08/08/1988			S		41,038	D		(2)		1,038 <sup>(2)</sup>	I	by 401(k) Plan (1)
			Table II								osed of, convertib				wned			
1. Title of Derivative Security (Instr. 3)	2. Conversior or Exercise Price of Derivative Security	e (Month/Day/Year)	Execut ar) if any	3A. Deemed Execution Date, if any (Month/Day/Year)		ction nstr.			6. Date Exerc Expiration Day/\(\text{(Month/Day/\)}\)		ate	7. Title Amoun Securit Underly Derivat Securit and 4)	t of ies ying ive y (Instr.	Deri Sec (Ins	rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	) (A) (D)		Date Evereisable		Expiration	Title	Amount or Number of						

## **Explanation of Responses:**

11/18/2003 Fred P. Lampropoulos

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

<sup>2.</sup> Represent plan holdings as of 8/22/2003 based upon most recent plan statement timely distributed.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).