FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* LAMPROPOULOS FRED P						2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC [MMSI]								c all appl Direct	licable) tor		Owner
(Last) 1600 W I	(Last) (First) (Middle) 1600 W MARIT PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 11/12/2003								Officer (give title Other (spe below) below) President, CEO			
(Street) SO JORDAN UT 84095 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)									Form	filed by One	oup Filing (Check Applicable ne Reporting Person ore than One Reporting	
1. Title of S	Non-Deriva 2. Transaction Date (Month/Day/Y	n ear)	2A. Deemed Execution Date,		Transaction Disposed (Code (Instr. 5)			of, or Beneficially les Acquired (A) or Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned		6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount (A) o		Price		Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	(Instr. 4)
Common	Stock, no	par value		11/12/200)3	11/1	2/2003	S		1,342	D	\$2	7.09	72	28,731	D	
Common	Stock, no	par value		11/12/200)3	11/1	2/2003	S		2,000	D	\$2	7.15	72	26,731	D	
Common Stock, no par value			11/12/2003		11/12/2003		S		2,000	D	\$2	\$27.38		724,731 D			
Common Stock, no par value			11/12/2003		11/12/2003		S		1,658	D	\$27	\$27.0518		723,073 D			
Common Stock, no par value		11/12/2003 11/1		2/2003	S		400	D	\$2	\$27.29		22,673 D					
Common Stock, no par value			11/12/200	11/12/2003 11/		11/12/2003			200	D	\$2	\$27.27		22,473 D			
Common Stock, no par value				11/12/200	.003 11/1		2/2003	S		100	D	\$2	\$27.22		22,373	D	
Common Stock, no par value				11/12/2003		11/12/2003		S		800	D	\$27.19		721,573		D	
Common Stock, no par value				11/12/2003		11/12/2003		S		217	D	\$27.43		721,356		D	
Common Stock, no par value				11/12/2003		11/12/2003		S		848	D	\$27.41		720,508		D	
Common Stock, no par value				11/12/200	11/12/2003 11/		2/2003	S		1,000	D	\$27.2		719,508		D	
Common Stock, no par value			08/08/198	3/08/1988 08/0		8/1988	М		41,038	D	(1)		41,038		I	by 401(k) Plan ⁽¹⁾	
		Та	able	II - Derivati (e.g., pu						osed of, convertib				wned			,
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	on Date E se (Month/Day/Year) if	Exec if an	cution Date,	Code	action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, and 5)	Expiration e (Month/Day s			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		of Der Sec (Ins	derivatirivative curity str. 5) Str. 5) Guned Followi Reporte Transac	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s(Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A) (D)	Date Exerci	sable	Expiration Date		Amou or Numb of Shares	er				

Explanation of Responses:

 $1. \ Represents \ plan \ holdings \ as \ of \ 8/22/2003 \ per \ most \ recent \ plan \ statement \ timely \ distributed.$

Fred P. Lampropoulos

11/12/2003

** Signature of Reporting Person

n Date

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

 $^{^{\}star}$ 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.