#### CRITICARE SYSTEMS INC /DE/

Form 4

March 15, 2006

# FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average

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**OMB APPROVAL** 

if no longer subject to Section 16. Form 4 or Form 5

obligations

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

(11111 of 1)pe	responses)								
1. Name and Address of Reporting Person * BAILEY HIGGINS D			Symbol		Ticker or Trading STEMS INC /DE/	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) NO CIRCLE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/13/2006			_X_ Director Officer (give below)	e title 10% below)		
102 CLLI II					. 0:: 1		: ./G F:::	(61. 1	
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
PALM DES	SERT, CA 922	11				Form filed by I Person	More than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-E	Perivative Securities Acq	quired, Disposed o	f, or Beneficial	lly Owne	
1.Title of Security	2. Transaction (Month/Day/Y			3. Transacti	4. Securities Acquired on(A) or Disposed of	5. Amount of Securities	6. Ownership Form: Direct		

		Table	1 - Mon-De	envauve	occur i	ues Acq	luii eu, Disposeu o	i, oi benenciai	ly Owneu
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	on(A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		
Common Stock, par value \$.04 per share	03/13/2006		S	5,600	D	\$ 4.6	1,900	D	
Common Stock, par value \$.04 per share	03/13/2006		S	1,400	D	\$ 4.61	500	D	
Common Stock, par value \$.04 per share	03/13/2006		S	500	D	\$ 4.65	0	D	

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

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 control number.

**SEC 1474** 

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Titl	e and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Da	nte	Amou	nt of	Derivative	]
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	5
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	]
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired						J
					(A) or						J
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	m: 1	or		
						Exercisable	-		Number		
									of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships
Reporting Owner Name / Address	

Director 10% Owner Officer Other

BAILEY HIGGINS D 102 CELANO CIRCLE X PALM DESERT, CA 92211

### **Signatures**

Joel D. Knudson, Attorney-in-fact 03/14/2006

\*\*Signature of Reporting Person Date

# **Explanation of Responses:**

\* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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