FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person [*] Drexler Karen			2. Issuer Name and Ticker or Trading Symbol Outset Medical, Inc. [OM]							(Ch	elationshi eck all app K Direc								
(Last)	,	(First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/31/2023									Office below	er (give title v)		Other (below)	specify		
3052 ORCHARD DRIVE				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) SAN JO	SE CA	A 9	5134													n filed by Or n filed by Mo on		•	
(City)	(Si	ate) (2	Zip)		Rule 10b5-1(c) Transaction Indication														
											action was n ons of Rule 1					truction or wr	ritten pla	an that is int	ended to
		Table	I - No	n-Deriva	tive S	ecu	rities	Acq	uired,	Dis	posed of	f, or l	Bene	eficia	lly Owr	ned			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Day			Execution Date,		3. Transaction Code (Instr.4. Securities Acquired Disposed Of (D) (Instr. and 5)			3, 4 Secu		rities Fo ficially (D ed In		: Direct r ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
								Code	v	Amount	(A (D) or))	Price		ted action(s) 3 and 4)	ľ	,	. ,	
Common Stock 05/31			05/31/2	2023		A ⁽¹⁾		7,681		A	\$ <mark>0.0</mark>).0 23,232			D				
		Tab		Derivati (e.g., pu											y Owne	ed			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Executi Security or Exercise (Month/Day/Year) if any		eemed tion Date, h/Day/Year)	4. Transaction Code (Instr. 8)			vative rities lired r osed) r. 3, 4	6. Date Exerci Expiration Da (Month/Day/Yo		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		5 (. Price of Derivative Security Instr. 5)		iy i	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)	
			Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Shar	ber							

Explanation of Responses:

1. 100% of the shares underlying these RSUs will vest upon the earlier of (i) the one-year anniversary of the date of grant or (ii) the date of the Issuer's next Annual Meeting of Stockholders

By: John L Brottem For:
Karen Drexler05/31/2023

** 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.

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