FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Vashington	D.C. 20549	
vasilington,	D.C. 20049	

	J ,		

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average bu	rden									
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

Name and Address of Reporting Person* LANG BRENT D.				2. Issuer Name and Ticker or Trading Symbol Outset Medical, Inc. [OM]								k all app	licable)	ng Per	rson(s) to Is				
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 05/29/2024								Office below	er (give title v)		Other (s below)	specify		
3052 OR	.CHARD D	RIVE			4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street)	SE CA	, 9	5134										X	X Form filed by One Reporting Person Form filed by More than One Reportin					
	<u> </u>														Perso	on			
(City)	(Sta	ate) (Z	Zip)		Rul	e 10)b5-	1(c)	Tran	sac	tion Indi	catio	on						
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									n that is inter	nded to									
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficiall	y Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Execution Date,		Date,	3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr. 5)				, 4 and Secu Bene Owne		cially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) (D)	or F	Price	Report Transa (Instr. 3	ted action(s) 3 and 4)			(Instr. 4)
Common Stock			05/29/2	2024				A		25,000(1)	A	\$0.0		133,024			D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	xercise (Month/Day/Year) if any Code (Instr. 8) Derivati Securiti Acquire		rative rities nired r osed)	Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code			Expiration Date	Title	Amou or Numb of Share	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: Brent 05/29/2024 **D** Lang

** 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.