FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D	.C. 20549
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Check this box if no longer subjec
Section 16. Form 4 or Form 5
bligations may continue. See
nstruction 1(b)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
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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*     Trigg Leslie					2. Issuer Name <b>and</b> Ticker or Trading Symbol Outset Medical, Inc. [ OM ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
THISS DESIRE														X				10% O	
(Last) 3052 OR	Last) (First) (Middle) 052 ORCHARD DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 02/16/2023									Office below	er (give title v) Chair and		Other (sbelow)	specify
(Street)	DE CA	0	5124		4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
SAN JOS	SE CA	1 9	5134											X	X Form filed by One Reporting Person				
(City)	(Sta	ate) (Ž	Zip)										Form filed by More than One Reporting Person						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date				2. Transac Date (Month/Da		Exec if any	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired ( Disposed Of (D) (Instr. 3 5)			4 and Securit Benefic Owned		ies cially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) c (D)	Pr	ice		ed ction(s) 3 and 4)			(Instr. 4)
Common Stock				02/16/2	02/16/2023				<b>S</b> <sup>(1)</sup>		932	D	\$	24.36	6 413,112			D	
Common Stock				02/16/2	2/16/2023				<b>S</b> <sup>(2)</sup>		2,083	D	\$	24.36	4.36 411,02		,029 I		
Common Stock															8,770			I	Trigg Family Trust
	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)	Title of 2. 3. Transaction 3A. Deemed Execution Date, or Score (Month/Day/Year) if any Code				Transa Code (	saction of Derive Secur Acqui (A) or Dispo of (D) (Instr. and 5		rative rities ired r osed )	6. Date Expirati (Month/	ion Da	isable and 7. Title ar		nt of ities lying ative ity (Ins	De Se (In	3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amou or Numb of Share	er					

## Explanation of Responses:

- 1. Required number of shares sold by the reporting person to cover tax withholding obligations in connection with the vesting of 1,821 shares of Common Stock underlying RSUs granted to the reporting person on March 15, 2021. This sale was made to satisfy tax withholding obligations through a "sell to cover" transaction and does not represent a discretionary trade by the reporting person.
- 2. Required number of shares sold by the reporting person to cover tax withholding obligations in connection with the vesting of 4,071 shares of Common Stock underlying RSUs granted to the reporting person on January 26, 2022. This sale was made to satisfy tax withholding obligations through a "sell to cover" transaction and does not represent a discretionary trade by the reporting person.

By: John L Brottem For: Leslie Trigg

02/16/2023

\*\* Signature of Reporting Person

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.