Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
- 1	hours nor roomanas	0.5								

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*     Ahmed Nabeel				2. Issuer Name and Ticker or Trading Symbol Outset Medical, Inc. [ OM ]							(Check all app Direc		etor 10%		10% Ov	vner			
(Last) 3052 OR	(First) (Middle) ORCHARD DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 01/08/2024							X	belov	er (give title v) Chief Finat	ncial (	Other (s below) Officer	specify		
				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street) SAN JOS	SE CA	. 9	5134											X		filed by One		J	
	SAN JOSE CA 73134												Form filed by More than One Reporting Person						
(City)	(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication													
					$ $ $ $ $ $	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - No	n-Deriva	ative S	Secui	rities	Acq	uired,	, Dis	posed of	, or E	Benef	iciall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Executy/Year) if any		Deemed cution Date, ny nth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Ac Disposed Of (D. 5)							ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or P	rice	Report Transa (Instr.	action(s) 3 and 4)			(Instr. 4)
Common Stock 01/08/2					2024				S		10,709(1)	) [	) {	\$5.49	76,819			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)	ve Conversion Date Execution Date,		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (In: 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y D (I	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 18,877 shares of Common Stock underlying RSUs granted to the reporting person on January 6, 2023. 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:

01/08/2024

Nabeel Ahmed

\*\* 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.