FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 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*     Vazquez Martin						2. Issuer Name and Ticker or Trading Symbol Outset Medical, Inc. [ OM ]									all appli Directo	or		10% Ov	vner
(Last) 3052 OR	(Fi	,	, , ,				3. Date of Earliest Transaction (Month/Day/Year) 06/01/2021								X Officer (give title below) Other (specify below)  Chief Operating Officer				
(Street) SAN JOSE CA 95134 (City) (State) (Zip)					- 4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y				Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5)	Beneficially Owned Fol		Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	ction(s)			(Instr. 4)	
Common Stock 06/01/20			021	21		M		5,000	Α	\$3.8	\$3.88		14,255		D				
Common Stock 06/01/20		021	21		S <sup>(1)</sup>		5,000	D	\$47.90	\$47.9058 <sup>(2)</sup>		9,255		D					
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)			Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisab Expiration Date (Month/Day/Year)		le and 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indirect (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amou or Numb of Share	er					
Non- Qualified Stock Option (right to buy)	\$3.88	06/01/2021			М			5,000	(3	3)	12/19/2027	Common Stock	5,00	00	\$0.0	84,489		D	

## Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 Trading Plan adopted by the reporting person on December 14. 2020.
- 2. The price reported in Column 4 is a weighted average price. The shares of common stock of the Issuer were sold in multiple transactions at prices ranging from \$47.45 to \$48.94, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 3. This option vests 25% on October 9, 2018 and then in 36 equal monthly installments thereafter, subject to the reporting person's continued employment through the applicable vesting period.

By: John L Brottem For: Martin Vazquez

06/02/2021

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.