FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | VAL |
|------------------------|-----------|
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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

| 1. Name and Address of Reporting Person* WRIGHT RICHARD C | | | | | | | 2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC [UHS] | | | | | | | | | | all app Direc Office | olicable) etor er (give title | Oth | Owner er (specify | | |
|--|--|---------|--|---|--|-----------------------------------|---|---|---------|-------------------------------------|--------|--------------------|--|--------------------------------|----------|--------------------|--|--|---|---|--|--|
| (Last) (First) (Middle) UHS OF DELAWARE, INC. | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/02/2010 | | | | | | | | | | belov | , | belo resident | w) | | |
| 1516 EAST FRANKLIN STREET, SUITE 202 | | | | | | | | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) CHAPEL HILL NC 27514 | | | | | T. II Allichanichi, Date di Originai Filea (Monthibay) Teal) | | | | | | | | | | ne) X | | | | | | | |
| (City) | | (State) | (Z | Zip) | | | | | | | | | | | | | 1 010 | 011 | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | Execution Date, | | | n Date, | Transaction Dispose Code (Instr. 5) | | Disposed | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | and Secur Benef | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | of Indirect | | |
| | | | | | | | | | | | v | Amount | (A) | or | Price | Tra | | action(s) 3 and 4) | | (111511.4) | | |
| Class B Common Stock 12/02/ | | | | | | | | | | S | | 2,023 | | D | \$41.33 | | 2,000 | | D | | | |
| Class B Common Stock 12/02/2 | | | | | | | /2010 | | | | | 2,000 | | D | \$41.34 | | 0 | | D | | | |
| | | | Та | | | | | | | | | sed of, o | | | | y Ow | ned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercis Price of Derivative Security | on Date | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, | i. Transaction Code (Instr. | | n of | | 6. Date E Expiratio (Month/D | n Date | • | 7. Title and Amount of Securities Underlying Derivative Security (Instr and 4) | | str. 3 | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | | |
| | | | | | | Code | v | (A) | | Date Exercisal | | Expiration Date | Title | Amo or Num of Shai | ber | | | | | | | |

Explanation of Responses:

/s/ Richard C. Wright

12/02/2010

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).