

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden 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

1. Name and Address of Reporting Person* <u>MILLER ALAN B</u>			2. Issuer Name and Ticker or Trading Symbol <u>UNIVERSAL HEALTH SERVICES INC [UHS]</u>			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) Chairman, President and CEO		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) <u>03/11/2005</u>			6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person		
UNIVERSAL CORPORATE CENTER 367 SOUTH GULPH ROAD			4. If Amendment, Date of Original Filed (Month/Day/Year)					
(Street) <u>KING OF PRUSSIA PA 19406</u>								
(City) (State) (Zip)								

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Class B Common Stock	03/11/2005		D		319,490	D	\$0.01	435,640	D	
Class B Common Stock	03/11/2005		A		200,000 ⁽⁴⁾	A	\$0.01	635,640	D	
Class B Common Stock	03/11/2005		A		119,340 ⁽²⁾	A	\$0.01	754,980	D	
Class B Common Stock								33,000	I	Alan B. Miller Family Foundation

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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	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 (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V		Date Exercisable	Expiration Date					

Explanation of Responses:

- These shares were granted pursuant to the 2001 Employees' Restricted Stock Purchase Plan. The shares vest in 1/3 increments on 3/11/2006, 3/11/2007 and 3/11/2008 and are subject to forfeiture if Universal Health Services, Inc. does not achieve a specified earnings threshold for 2005.
- These shares were granted pursuant to the 2001 Employees' Restricted Stock Purchase Plan. The shares vest in 1/3 increments on 3/11/2006, 3/11/2007 and 3/11/2008 and are subject to forfeiture if Universal Health Services, Inc. does not achieve a specified return on capital for 2005.

Charles F. Boyle, Attorney-in-Fact

03/15/2005

** 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.

POWER OF ATTORNEY

I, Alan B. Miller, do hereby designate Steve Filton and Charles F. Boyle to act as my lawful attorneys-in-fact to execute and have delivered on my behalf, with the following powers, all that said attorney shall lawfully do or cause to be done by virtue hereof.

Such necessary forms shall consist of Form 4, Statement of Changes in Beneficial Ownership and Form 5, Annual Statement of Changes in Beneficial Ownership.

/s/ Alan B. Miller

Signed and dated on this 15th day of March 2004.

The undersigned, Steve Filton and Charles F. Boyle hereby affirm that we are the persons named herein as attorneys-in-fact and that our original signatures are affixed to this document.

/s/ Steve Filton

/s/ Charles F. Boyle

Signed and dated on this 15th day of March 2004

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF MONTGOMERY

On this 15th day of March, in the year 2004, before me, Celeste A. Stellabott, personally appeared Alan B. Miller, Steve Filton and Charles F. Boyle, personally known to me, and acknowledged to me that they executed the foregoing instrument as their free and voluntary act and deed.

/s/ Celeste A. Stellabott
Signature of Notary Public

(SEAL)