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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OIVID AFFE |
|------------------------|-------------|
| EC IN DENETICIAL OWNER | OMB Number: |

| led pursuant to Section 16(a) of the Securities Exchange Act of 1934 |
|--|
| or Section 30(h) of the Investment Company Act of 1940 |

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-0 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

| 1. Name and Address of Reporting Person* OSTEEN DEBRA K | | | | U | 2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC [UHS] | | | | | | [(Ch | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify | | | vner |
|--|---|---|-----------------------------|------------------|---|-----------|-------------|--|--|----------------------------|---|---|---|---|---|
| (Last) (First) (Middle) UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/18/2012 | | | | | | Senior Vice President | | | | |
| (Street) KING O PRUSSI | A PA | | 19406 (Zip) | 4. | If Ame | ndment, I | Date (| of Original Fil | ed (Month/E | oay/Year) | Line | e) <mark>X</mark> Form f | iled by One R iled by More t | iling (Check Ap Reporting Perso than One Repo | n |
| | ` | - | ole I - Non-I | Derivativ | re Se | curities | s Ac | auired. D | isposed | of. or Be | neficial | v Owned | <u> </u> | | |
| Date (Month/D: | | | | Month/Day/\ | ay/Year) Execution Date, if any (Month/Day/Year) Cod 8) | | | Transacti Code (Ins 8) Code V | On Dispose 5) Amoun | f, or Ben | Price | d Securities F Beneficially (I Owned Following R Reported Transaction(s) (Instr. 3 and 4) | | orm: Direct D) or Indirect) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | onversion r Exercise (Month/Day/Year) Execurice of erivative (Month/Day/Year) | 3A. Deemed Execution Dat | te, Trans | ransaction ode (Instr. Se Ad | | 5. Number 6 | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | d Amount ies g e Security nd 4) | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Option To Purchase Class B Common | \$36.95 | 01/18/2012 | | A ⁽¹⁾ | | 70,000 | | (2) | 01/18/2017 | Class B Common Stock | 70,000 | \$0 | 70,000 | D | |

Explanation of Responses:

- 1. Options granted to purchase shares of Class B Common Stock under the Company's Second Amended and Restated 2005 Stock Incentive Plan.
- 2. The option vests ratably on each of 1/18/2013, 1/18/2014, 1/18/2015 and 1/18/2016.

/s/ Steve Filton, Attorney-in-Fact for Ms. Osteen

01/19/2012

** 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.