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(h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 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

1. Name and Address of Reporting Person*  WRIGHT RICHARD C							2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC. [ UHS ]								k all applic Directo	or (give title		10% Owner Other (specify below)		
(Last) (First) (Middle) UHS OF DELAWARE, INC. 1516 EAST FRANKLIN STREET, SUITE 202						3. Date of Earliest Transaction (Month/Day/Year) 11/21/2012									Vice President					
(Street) CHAPEL HILL NC 27514  (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	′					
		Tak	le I - Noi	n-Deri\	vativ	e Se	curit	ties Ac	quired	, Dis	posed o	f, or Be	nefic	ially	Owned					
Da				Date	2. Transaction Date (Month/Day/Year			2A. Deemed Execution Date, if any (Month/Day/Year)				4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securitie Benefici Owned F		Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) o (D)	r Pric	e	Reported Transact (Instr. 3	ion(s)			(Instr. 4)	
Class B Common Stock 11/21/						2					10,00	0 A	\$1	6.22	10,000			D		
Class B Common Stock 11/21/						/2012					4,198	3 D	\$4	2.85	5,802			D		
		-	Table II -								osed of, converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,		Transaction Code (Instr.		of		Exercis on Dat Day/Ye		of Securitie		[	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	s Silly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	per						
Option To Purchase Class B Common	\$16.22	11/21/2012			М			10,000	(1)		11/21/2013	Class B Common Stock	10,0	00	\$0	0		D		

## Explanation of Responses:

1. Option vested on 11/21/2012.

/s/ Steve Filton, Attorney-in-Fact for Mr. Wright

11/21/2012

\*\* 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.