FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL		
OMB Number:		3235-028

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

37 Estimated average burden 0.5 hours per response:

or Section 30(h) of the Investment Company Act of 1940 5. Relationship of Reporting Person(s) to Issuer 2. Issuer Name and Ticker or Trading Symbol 1. Name and Address of Reporting Person (Check all applicable) UNIVERSAL HEALTH SERVICES INC **OSTEEN DEBRA K** Director 10% Owner UHS ] Officer (give title Other (specify below) below) (Last) (First) (Middle) Vice President 3. Date of Earliest Transaction (Month/Day/Year) UNIVERSAL CORPORATE CENTER 12/11/2003 367SOUTH GULPH ROAD 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable (Street) KING OF Form filed by One Reporting Person 19406 **PRUSSIA** Form filed by More than One Reporting (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 6. Ownership Form: Direct 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 5. Amount of 7. Nature Transaction of Indirect Execution Date Securities (Month/Day/Year Beneficially if any Code (Instr. (D) or Indirect **Beneficial** (Month/Day/Year) 8) Owned Following (I) (Instr. 4) (Instr. 4) Reported (A) or (D) Transaction(s) ν Price Code Amount (Instr. 3 and 4) M<sup>(1)</sup> 12/11/2003 Class B Common Stock  $8,000^{(2)}$ A 83,636 \$0.00 D Class B Common Stock 12/11/2003 F 2,793 D \$52.6 80,843 D Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 5. Number 1. Title of 3. Transaction 3A. Deemed 6. Date Exercisable and 7. Title and 8. Price of 9. Number of 11. Nature Derivative Conversion Execution Date Transaction Expiration Date (Month/Day/Year) Amount of Derivative Date (Month/Day/Year) Derivative Security or Exercise if any Code (Instr. Securities Security Securities Form: Beneficial Price of Derivative Securities Acquired Underlying Derivative Security Beneficially Owned Direct (D) or Indirect (Instr. 3) (Month/Day/Year) 8) (Instr. 5) Ownership (Instr. 4) (A) or Disposed Security (Instr. 3 and 4) Following (I) (Instr. 4) Reported of (D) Transaction(s) (Instr. 3, 4 and 5) (Instr. 4) Amount Number

## **Explanation of Responses:**

\$22,2813

\$11.8438

Option to

nurchase

Class B

Commo

Option to

purchase Class B

Common

Stock

Stock

1. Consists of Class B Common Stock of Universal Health Services, Inc. (the "Class B Shares") issued upon exercise of stock options to purchase Class B Shares at exercise prices of \$22.2813 and \$11.8438 per share, respectively, by simultaneously exchanging 5,207 Class B Shares at a fair market value of \$52.60 per share.

Date

Exercisable

01/19/2001

09/28/2000

2. 5,000 of the Class B shares were acquired at an exercise price of \$22.2813 and 3,000 of the Class B Shares were acquired at an exercise price of \$11.8438 per share.

ν Code

M

M

(A) (D)

5.000

3.000

Debra K. Osteen

Expiration

01/19/2005

09/28/2004

Title

Option

to

purchase

Class B

Common

Option

to

purchase

Class B

Commo

Stock

Date

12/11/2003

\*\* Signature of Reporting Person

Shares

5,000

3,000

\$22,2813

\$11.8438

Date

105,000

102,000

D

D

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).

12/11/2003

12/11/2003

\*\* 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.