FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								

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*  PANTALEONI ANTHONY  (Last) (First) (Middle)  FULBRIGHT & JAWORSKI LLP  666 FIFTH AVENUE							2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC [ UHS ]  3. Date of Earliest Transaction (Month/Day/Year) 12/08/2006										o of Reporting olicable) etor er (give title v)	ng Person(s) to Issu 10% Own Other (sp below)		wner (specify	
(Street) NEW YORK NY 10103 (City) (State) (Zip)							4. If Amendment, Date of Original Filed (Month/Day/Year)									i. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transact Date (Month/Day)					ection	tion 2A. Deemed Execution Date,			auired, Disposed of, or Benefic 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4					A) or	or 5. Amount of			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Class B Common Stock 12/08/2							2006			v	Amount 1,299	(D)		Price \$54.9			action(s) 3 and 4) 3,556	D		, ,	
Class B Common Stock																	3,780	I	- 1	Trustee f/b/o family	
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. Conversio or Exercise Price of Derivative Security	ise (Month/Day/Year) if any (Month/Day/Year) Code (Instr. Derivative Securities Acquired						ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)						8. Pric Deriva Securi (Instr.		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct ( or Indir (I) (Inst	D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V (A				(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Sha	ber							

Explanation of Responses:

**Anthony Pantaleoni** 

12/12/2006

\*\* 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.