FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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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* Gibbs Lawrence S.					2. Issuer Name and Ticker or Trading Symbol <u>UNIVERSAL HEALTH SERVICES INC</u> [UHS]											all app	olicable) ctor	g Person(s) to Issuer 10% Owner		
(Last) (First) (Middle) RAMIUS LLC 599 LEXINGTON AVENUE #20				3. Date of Earliest Transaction (Month/Day/Year) 03/14/2013											Office below	er (give title w)		ner (specify ow)		
(Street) NEW YORK NY 10022 (City) (State) (Zip)					_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Indivine)	·				
		Tabl	e I - Noi	n-Deriv	/ative	Se	curitie	s Ac	quired,	Dis	posed o	of, or	Ben	eficia	ally	Owne	ed			
Da					2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.		Disposed	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and Sec Bei Ow		ount of ities icially d Following ted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	t of Indirect ct Beneficial	of Indirect Beneficial Ownership
							Code	v	Amount		A) or D)	Price		Transaction(s) (Instr. 3 and 4)			, , ,			
Class B Common Stock				03/14/2013				S		720	D \$		\$61	.51	1 721		D			
	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)	titive Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any					Transaction Code (Instr.		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownershi ct (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A) (D)				Expiration Date	or Number of Title Shares		nber						

Explanation of Responses:

/s/ Lawrence S. Gibbs

03/14/2013

** 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.