TENET HEALTHCARE CORP

Form 4

February 18, 2005

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SECURITIES

OMB 3235-0287

Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Number: January 31, 2005

OMB APPROVAL

if no longer subject to Section 16. Form 4 or Form 5

Estimated average burden hours per response... 0.5

Form 5 obligations may continue. Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

See Instruction

	ddress of Reporting P VICZ E PETER	Symbol	Name and Ticker or Trading HEALTHCARE CORP	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 13737 NOE		3. Date of (Month/D 02/16/20		Director 10% Owner _X_ Officer (give title Other (specify below) General Counsel and Secretary			
DALLAS, T	(Street)		ndment, Date Original hth/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State) (Z	Zip) Table	e I - Non-Derivative Securities A	cquired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price	5. Amount of Securities Form: Direct Indirect Beneficially (D) or Beneficial Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) Reported Transaction(s) (Instr. 3 and 4)			
Common Stock				3,500 I By IRA			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	ctionE S S) A E	5. Number of tiorDerivative Securities) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
2005 February Option (Right to Buy)	\$ 10.52	02/16/2005		A	1	133,333		<u>(1)</u>	02/16/2015	Common Stock	133,33
2005 February Restricted Units	(2)	02/16/2005		A		36,667		(2)	<u>(2)</u>	Common Stock	36,667
2003 December Option (Right to Buy)	\$ 15.68							<u>(1)</u>	12/22/2013	Common Stock	125,00
2004 March Option (Right to Buy)	\$ 12.01							<u>(1)</u>	03/03/2014	Common Stock	133,33
2004 March Restricted Units	\$ 0 (2)							(2)	(2)	Common Stock	26,667

Reporting Owners

Reporting Owner Name / Address			Relationships	
	D' (100/ 0	O.C.	

Director 10% Owner Officer Other

URBANOWICZ E PETER 13737 NOEL ROAD DALLAS, TX 75240

General Counsel and Secretary

Signatures

Person

/s/ Urbanowicz,

E. Peter 02/18/2005

**Signature of Reporting Date

Reporting Owners 2

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Explanation of Responses:

- * 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).
- (1) These derivative securities (stock options) vest ratably on each of the first, second and third anniversaries of the date of grant.
- (2) These restricted units vest ratably on each of the first, second and third anniversaries of the date of grant. Restricted Units are settled in shares of the Company's common stock upon vesting.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.