

TENET HEALTHCARE CORP  
 Form 3  
 November 18, 2002

<b>FORM 3</b>	<p><b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b></p> <p>Washington, D.C. 20549</p> <p><b>INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES</b></p> <p>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(f) of the Investment Company Act of 1940</p>	<p>OMB APPROVAL</p> <hr/> <p>OMB Number: 3235-0104 Expires: December 31, 2001 Estimated average burden hours per response. . . . . 0.5</p>
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<p>1. Name and Address of Reporting Person* <b>Fetter, Trevor</b></p> <p>(Last) (First) (Middle)</p> <p><b>3820 State Street</b></p> <p>(Street)</p> <p><b>Santa Barbara, CA 93105</b></p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement (Month/Day/Year)</p> <p style="text-align: center;"><b>November 07, 2002</b></p> <p>3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)</p>	<p>4. Issuer Name and Ticker or Trading Symbol <b>Tenet Healthcare Corporation THC</b></p> <p>5. Relationship of Reporting Person(s) to Issuer (Check all applicable)</p> <p>____ Director _____</p> <p>10% Owner _____</p> <p><input checked="" type="checkbox"/> Officer _____</p> <p>Other _____</p> <p>Officer/Other Description <b>President</b></p>	<p>6. If Amendment, Date of Original (Month/Day/Year)</p> <hr/> <p>7. Individual or Joint/Group Filing (Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Individual Filing</p> <p><input type="checkbox"/> Joint/Group Filing</p>
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**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form : (D) Direct (I) Indirect (Instr. 5)	4. Nature of Beneficial Ownership (Instr. 5)
<b>Common Stock</b>	<b>10,200</b>	<b>I</b>	<b>By Spouse</b>

(over)  
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**Form 3 (continued)**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable(DE) and Expiration Date(ED)	3. Title and Amount of Underlying Security (Instr. 4)	4. Conversion or Exercise Price	5. Ownership Form (D) Direct or (I) Indirect (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	_____ (DE)   (ED)				

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<b>1997 B Option (Right to Buy)</b>	<b>Vest Ratably   12/02/2007</b>	<b>Common Stock - 75,000</b>	<b>\$22.04</b>	<b>D</b>	
<b>1999 C Option (Right to Buy)</b>	<b>Vest Ratably   07/28/2009</b>	<b>Common Stock - 25,000</b>	<b>\$11.12</b>	<b>D</b>	
<b>Call Option (Right to Buy)</b>	<b>11/01/2002   11/15/2002</b>	<b>Common Stock - 50,000</b>	<b>\$35.00</b>	<b>D</b>	
<b>Put Option (obligation to buy)</b>	<b>11/01/2002   01/17/2003</b>	<b>Common Stock - 10,000</b>	<b>\$30.00</b>	<b>D</b>	

Explanation of Responses :

\*\* Intentional misstatements or omissions of facts \_\_\_\_\_  
constitute Federal Criminal Violations.

See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).      \*\* Signature of Reporting Person  
Date

Note: File three copies of this Form, one of  
which must be manually signed. If space is  
insufficient,

**Trevor Fetter**

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.

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