BlackRock Health Sciences Trust Form 3 February 28, 2005 UNITED STATES SECURITIES AND EXCHANGE COMMISSION FORM 3 Washington, D.C. 20549

### **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> SHEA RICHARD M			<ul><li>2. Date of Event Requiring</li><li>Statement</li><li>(Month/Day/Year)</li></ul>	3. Issuer Name and Ticker or Trading Symbol BlackRock Health Sciences Trust [BME]			
(Last)	(First)	(Middle)	02/18/2005	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)		
C/O BLACKROCK FINANCIAL MANAGEMENT				(Check all applicable)			

FINANCIAL MANAGEMENT INC., 40 EAST 52ND STREET

(Street)

## NEW YORK, NYÂ 10022

(City)	(State)	(Zip)

1. Title of Security (Instr. 4)

#### Table I - Non-Derivative Securities Beneficially Owned

Director

(give title below) (specify below)

Vice President / Tax

\_X\_\_Officer

10% Owner

Other

2. Amount of Securities Beneficially Owned (Instr. 4)

4. Nature of Indirect Beneficial Ownership (Instr. 5)

Reporting Person

Person

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

SEC 1473 (7-02)

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.

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	(Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D)	

OMB APPROVAL			
OMB Number:	3235-0104		
Expires:	January 31, 2005		
Estimated average burden hours per			

0.5

response...

6. Individual or Joint/Group

Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting

Form filed by More than One

3. Ownership Form: Direct (D)

> or Indirect (I) (Instr. 5)

Shares or Indirect (I) (Instr. 5)

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships			
	Director	10% Owner	Officer	Other
SHEA RICHARD M C/O BLACKROCK FINANCIAL MANAGEMENT INC. 40 EAST 52ND STREET NEW YORK, NY 10022	Â	Â	Vice President / Tax	Â

## Signatures

Richard M. Shea	02/18/2005
<u>**</u> Signature of Reporting Person	Date

## **Explanation of Responses:**

### No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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. 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.