



**Division of Child Care & Early Childhood Education**  
P.O. Box 1437, Slot S150, Little Rock, AR 72203-1437  
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## Notice of Incident

**Date of Incident:** 4/20/2022

**Date Reported to DCCECE:** 4/21/2022

**Agency Name:** Perimeter Behavioral of Forrest City

**Agency Number:** 142

**Type of Facility:** PRTF/SRU

**Facility License Type:** Regular

**Type of Incident:** Emergency Room Visit

**Incident Description:** Resident [REDACTED] was taken to the emergency room for an x-ray of his right thumb due to pain resulting from a basketball injury approximately two weeks ago.

**Agency's Interim Corrective Action:** Resident was taken to the emergency room for further evaluation.

**Licensing Specialist Assigned:** C. Vardell

**Licensing Supervisor Assigned:** 4/20/2022

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**Child Abuse Hotline** (Only applies to maltreatment incidents)

**Was the Hotline Called:**No **Was it accepted?**N/A **Outcome:** N/A

**Assigned Investigator:** N/A

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**Date of DCCECE's Follow-up:** 4/22/2022 **Type of Follow-up:** Email

**Details from Follow-up:** 4/22/22-Licensing Specialist requested results of the x-ray of the resident's thumb.