



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:** 6/29/2022

**Date Reported to DCCECE:** 6/30/2022

**Agency Name:** Piney Ridge Treatment Center

**Agency Number:** 203

**Type of Facility:** PRTF/SRU

**Facility License Type:** Regular

**Type of Incident:** Emergency Room Visit

**Incident Description:** Resident [redacted] bit [redacted] lip upon returning to the facility from the dentist. APRN was notified and she ordered the resident to go to the emergency room.

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

**Licensing Specialist Assigned:** C. Vardell

**Licensing Supervisor Assigned:** 6/29/2022

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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:** 12:00:00 AM

**Type of Follow-up:** N/A

**Details from Follow-up:**