



Division of Child Care & Early Childhood Education
P.O. Box 1437, Slot S150, Little Rock, AR 72203-1437
P: 501.320.3971

Notice of Incident

Date of Incident: 8/11/2022

Date Reported to DCCECE: 8/15/2022

Agency Name: Perimeter of Forrest City

Agency Number: 142

Type of Facility: PRTF

Facility License Type: Regular

Type of Incident: Emergency Room Visit

Incident Description: Resident [REDACTED] sent to Forrest City Medical Center Emergency Room for a potential allergic reaction to medication. [REDACTED] was taken to the [REDACTED] Emergency Room.

Agency's Interim Corrective Action: Diagnosis: Allergy status to other drugs, medicaments, and biological substances. Continuance of care to follow-up with prescribing physician.

Licensing Specialist Assigned: K. Rice

Licensing Supervisor Assigned: 8/11/2022

Child Abuse Hotline (Only applies to maltreatment incidents)

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

Assigned Investigator: No

Date of DCCECE's Follow-up: 8/18/2022 **Type of Follow-up:** Email

Details from Follow-up: Medication adjustment



Division of Child Care & Early Childhood Education
P.O. Box 1437, Slot S140, Little Rock, AR 72203-1437
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Notice of Serious Incident

Date of Incident:8/11/2022

Date Received by DCCECE: 8/15/2022

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Facility Type: Residential

Incident Type: Licensing

Report Description: Resident (██████████) was evaluated at the Forrest City Medical Center for a potential allergic reaction to medication. **Diagnosis:** Allergy status to other drugs, medicaments, and biological substances. Patient with sensitivity to different types of medications.

Interim Action Narrative:

Maltreatment Narrative:

Outcome:

Licensing Narrative: Resident's medication was adjusted on 8/11/2022.