



Division of Child Care & Early Childhood Education  
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### Notice of Serious Incident

Date of Incident: 8/27/2023

Date Received by DCCECE: 8/28/2023

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Incident Type: Licensing

Report Description: x Serious injury requiring outside medical attention Resident Name/DOB: [REDACTED] State: [REDACTED] Date/Time of incident: 8/27/23-5:53pm Please give a description of the incident: Resident reported to Nurse with complaints of feeling lightheaded. The nurse sat the resident down to check him. When resident got up, he fainted and hit his head on the wall at the Nurses station. Resident did not disclose any activities or reason for feeling lightheaded prior to going to the Nurses station. Corrective Actions Taken: Resident was assessed and checked by nurse. The nurse consulted with APRN who recommended that [REDACTED] be sent to Forrest City Medical Center. Resident was diagnosed with a syncope and collapse-recurrent after assessment by Physician at Forrest City Medical Center. Resident has been referred to see a cardiologist specialist on 10-17-23 @9:30am Additional Information: None currently. Guardian Notified: [REDACTED] Grandmother

Interim Action Narrative: Resident was assessed by nursing and referred to FCMC for further evaluation.

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Maltreatment Narrative:

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Licensing Narrative: Licensing Specialist informed of provider reported incident. 8/29/2023, Licensing Specialist reviewed provider reported incident for licensing concerns.

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