



Division of Child Care & Early Childhood Education
P.O. Box 1437, Slot S140, Little Rock, AR 72203-1437
P: 501.682.8590 F: 501.683.6060 TDD: 501.682.1550

Notice of Serious Incident

Date of Incident: 8/30/2023

Date Received by DCCECE: 9/5/2023

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Incident Type: Licensing

Report Description: Residents Name/DOB: [REDACTED] State: Arkansas
Date/Time of incident: 8/30/23-16:20 Please give a description of the incident: Resident reported to Nurse that he was having chest pains. The origins of chest pain were not specified. 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 seen by Physician and given an X-Ray and medical assessments. The lungs were clear and mediastinal silhouettes were in normal limits. Resident sent back to the facility for continued monitoring as needed by Nurses. Additional Information: None currently. Guardian Notified: Kaylen Edwards, DHS Caseworker

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

Maltreatment Narrative:

Licensing Narrative: Licensing Specialist reviewed provider reported incident for licensing concerns.