



**Placement and Residential Licensing Unit**

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**Notice of Serious Incident**

**Case Number:** 019717

**Date of Incident:** 12/27/2023

**Date Received:** 12/28/2023

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

**Facility Number:** 142

**Incident Type:** Licensing

**Report Description:** Resident complained of stomach pain and expressed to nurse that he was not having bowel movements for the past week. Staff was seen by APRN and sent to the Forrest City Medical Center. After assessment he was given a fleet enema for the hospital and diagnosed with child constipation. He was sent back to the facility for continuance of care.

**Interim Action Narrative:** Resident assessed by APRN and sent to FCMC for further evaluation.

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**Maltreatment Narrative:**

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**Licensing Narrative:** Provider reported incident sent to licensing on 12/28/2024 but was not entered into ELS by the facility. Program Coordinator entered provider reported incident into ELS for documentation purposes.