

## **Placement and Residential Licensing Unit**

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** 

Case Number: 020692
Date of Incident: 4/18/2024
Date Received: 4/19/2024
Facility Name: Perimeter Behavioral of Forrest City
Facility Number: 142
Incident Type: Licensing
Report Description: Resident, was sent by order of Physician to Forrest City Medical Center to have for an X-ray after complaint of pain to APRN. Resident describes pain from sports related injury while playing basketball as ?rolling ankle in gym.? Resident returned to the milieu at 1035 (10:35 am cst) with no issues and no new complaints of pain Resident is on activity restriction for minimum three days until reassessment by Physician.
Interim Action Narrative:
Maltreatment Narrative:

Licensing Narrative: 04/19/24 LS White sent inquiry re youth's status. 04/22/24 agency reports: I just checked with the Nurses report he is doing fine and is still on activity restriction. No licensing concerns or citations to be noted.