

## **Placement and Residential Licensing Unit**

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**Notice of Serious Incident** 

Case Number: 024010
Date of Incident: 9/16/2024
Date Received: 9/16/2024
Facility Name: Perimeter Behavioral of Forrest City
Facility Number: 142
Incident Type: Licensing
Report Description: Resident, , was sent out to Forrest City Medical Center ER by order of Physician due to shaking and tremors. All vitals normal. Please see attached d/c paperwork from FCMC. Resident returned to milieu same day at 2143 (4:15 pm) without further complaint, no new issues, or new diagnosis.  Interim Action Narrative: Resident was sent to FCMC for further evaluation.
Maltreatment Narrative:
Licensing Narrative: Licensing reviewed provider reported incident for licensing concerns.

Facility provided documentation for this incident.