

## **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: 025259	
Date of Incident: 11/5/2024	
Date Received: 11/6/2024	
Facility Name: Perimeter Behavioral of Forrest City	
Facility Number: 142	
Incident Type: Licensing	
Report Description: Resident, was sent out to Forrest City Medical Center by order of Physician for further evaluation to his left ankle. Resident complained of pain after reporting rolling his ankle when getting out of bed the same morning. No bruising or swelling noted. Resident returned same day at 1556 (3:56 pm cst) with no issues and is on activity restriction until further evaluation.	
Interim Action Narrative:	
Maltreatment Narrative:	

Licensing Narrative: 11.6.24- Specialist received discharge paperwork for resident.