



**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

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**Notice of Serious Incident**

**Case Number:** 025300

**Date of Incident:** 11/6/2024

**Date Received:** 11/7/2024

**Facility Name:** Millcreek of Arkansas PRTF

**Facility Number:** 233

**Incident Type:** Licensing

**Report Description:** [REDACTED] was sent to Dallas County Medical Center for an x-ray due to continued worsening of cold despite antibiotics. It was found that he has [REDACTED]. PCP changed his antibiotic to levaquin.

**Interim Action Narrative:** Resident was evaluated at Dallas Co. Medical Center.

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**Maltreatment Narrative:**

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**Licensing Narrative:** Program Coordinator reviewed provider reported incident for licensing concerns. Facility provided documentation for this incident.