

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: 025597

Date of Incident: 11/17/2024

Date Received: 11/19/2024

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Incident Type: Licensing

Report Description: Resident, **Sector**, **was** sent out to Forrest City Medical Center by order of Physician for further evaluation to his right hand. Resident states he punched a box in the gym several weeks ago when upset at a peer and pain in his right hand persisted since. Swelling noted. Resident returned same day at 2250 (10:50 pm cst) with no issues and is on activity restriction until further evaluation by APRN.

Interim Action Narrative:

Maltreatment Narrative:

Licensing Narrative: 11.19.24- Facility emailed specialist with copy of SOR and FCMF discharge paperwork.