



Placement and Residential Licensing Unit

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Notice of Serious Incident

Case Number: 028560

Date of Incident: 3/26/2025

Date Received: 3/27/2025

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Incident Type: Licensing

Report Description: Resident, [REDACTED], presented to the Nurses station with complaints of feeling short of breath, watery eyes, and nasal congestion. Resident states he has allergies. Medicated Benadryl 25mg. Sixteen minutes later, Resident presented to Nurses station with shortness of breath, itchy watery eyes, sore throat, and cough. Upon assessment, Resident was wheezing. Resident does not have asthma. Roslyn Perry, APRN, notified and orders were received for COVID test, Flu A and B test, and to transport to [REDACTED] for further evaluation for shortness of breath.

[REDACTED]
[REDACTED] Resident returned to facility same day. No new issues. [REDACTED],
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Interim Action Narrative:

[REDACTED] **Narrative:**

Licensing Narrative: 3.28.25- Emailed facility about nurses notes and guardianship
Guardian is [REDACTED] Nursing notes uploaded
