



**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:** 028829

**Date of Incident:** 4/4/2025

**Date Received:** 4/7/2025

**Facility Name:** Elizabeth Mitchell Centers

**Facility Number:** 157

**Incident Type:** Licensing

**Report Description:** On 4/4/25 [REDACTED] DOB: [REDACTED], (Residential) reported vaginal bleeding, but denied cramping. Due to being pregnant, she was taken to [REDACTED] for evaluation. Blood work was taken, an ultrasound was performed. Client was diagnosed with a [REDACTED]. She was prescribed an antibiotic and has a follow-up with her [REDACTED] on 4/9/2025. The client is a DHS placement and the guardian was notified.

**Interim Action Narrative:**

---

[REDACTED] **Narrative:**

---

**Licensing Narrative:** 04.07.2025 Facility provided documentation to Licensing and documentation uploaded.