



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: PA16361CJ

Version Type: ORIGINAL
VERSION

Report Date: 8/12/2016 5:17 PM

Status: Submitted

Agency/Facility Information

Agency Name: Bexar County
Sheriff's Dept.

Agency Address: 200 N. Comal

Agency City: San Antonio

Agency State: TX

Agency Zip: 78207

Director Information

Director Salutation: Sheriff

Director First Name: Susan

Director Middle Name:

Director Last Name: Pamerleau

Reporter Name: De Los Santos,
Rose

Reporter Email: rose.delossantos@bexar.org

Decedent Information

Identity of Deceased

First Name: Jesus

Middle Name: Jose

Last Name: Lopez

Suffix:

Date of Birth: 12/20/1997

Sex: Male

Race:

Age At Time Of Death: 18

Date/Time of Custody (arrest, incarceration) (mm/dd/yyyy hh:mm AM/PM):

Date/Time of Custody or
Incident: 4/8/2016 5:00 PM

Date/Time of Death (mm/dd/yyyy hh:mm AM/PM):

Death Date and Time: 7/15/2016 6:23 PM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner
Evaluation?: Yes, results are
available

What was the manner of death? (select only one)

Manner of Death: Suicide

Medical Cause of Death:

Medical Cause of Death:

Asphyxia by hanging

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment: Not Applicable

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?: Not applicable;
cause of death was
suicide, intoxication
or illness/natural
causes

If a weapon caused the death, what type of weapon caused the death? (Hold CTRL to select all that apply)

Type of weapon that caused death?: Not Applicable

Was the cause of death the result of a pre-existing medical condition or did the decedent develop the condition after admission?

Pre existing medical condition?: Not Applicable;
cause of death was
accidental injury,
intoxication, suicide
or homicide

If death was an accident, homicide or suicide, what was the means of death?

Means of Death: Hanging,
strangulation

Location / Custody Information

Where did the event causing the death occur?

Street Address: 200 N. Comal

City: San Antonio

County: Bexar

Zip:

What location category best describes where the event causing the death occurred?

Location Category:

What type of custody/facility was the Decedent in at the time of death:

Type of Custody: County Jail

Specific type of custody/facility:

Specific Type of Custody/Facility:

Jail - multiple occupancy cell

What was the time and date of the deceased's entry into the law enforcement facility where the death occurred (mm/dd/yyyy hh:mm AM/PM):

Entry Date Time: 4/9/2016 1:58 AM

Where did the death occur?

Death Location: At medical facility

General Information

Did any other law enforcement agencies respond to calls for service related to this incident?

Other Agencies Respond?:

What were the most serious offense(s) with which the deceased was (or would have been) charged with at the time of death?

Offense 1:

Capital Murder - Other

Offense 2:

Possession Marijuana 0-2 oz

Offense 3:

Unlawful Carry -Weapon - MV

Were the Charges:: Filed

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense:

At any time during the incident and/or entry into the law enforcement facility, did the decedent display or use a weapon?

Decedent display/use of
weapons:

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Attempt to Injure Others?:

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Appear intoxicated (alcohol or
drugs): No

Make suicidal statements?:

Exhibit any mental health
problems?:

Exhibit any medical problems?:

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Barricade self or initiate standoff?:	Resist being handcuffed or arrested?:	No
Physically attempt/assault officer(s):	Gain possession of officer's weapon:	
Verbally threaten other(s) including law:	Escape or attempt to escape/flee custody:	
Attempt gain possession officer's weapon:		

Was the deceased under restraint in the time leading up to the death or the events causing the death?

Under Restraint: No

Summary of Incident

Summary of How the Death Occurred: (max. 30,000 characters)

Summary:

On 07/14/2016 at approximately 0823 hours, Unit Officer observed Inmate Lopez hanging inside his assigned cell. CPR was started by the Officer until medical staff arrived in the unit. SAFD/EMS arrived onto the scene at approximately 0835 hours. Inmate Lopez was transported to University Hospital Emergency Room. On 07/15/2016, MDS Stephanie Levine officially called Inmate Lopez's time of death 1823 hours, due test results reflecting the Inmate had no brain activity. Autopsy results are pending.