KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	PA16515CJ	Version Type:	AMENDED
Report Date:	11/6/2020 10:50 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Denton County Sheriff's Office.	Agency Address:	127 N. Woodrow Ln.
Agency City:	Denton	Agency State:	TX
Agency Zip:	76205		

Director Information

Director Salutation:	Sheriff	Director First Name:	William
Director Middle Name:			
Director Last Name:	Travis		
Reporter Name:	Michael Tutt	Reporter Email:	michael.tutt@dentoncounty.com

Decedent Information

Identity of Deceased

First Name: Michael

Middle Name: Ryan

Last Name: Eugenio

Suffix:

Date of Birth: 6/8/1988 Sex: Male

Race:

Age At Time Of Death: 28

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

Date/Time of Custody or Incident: 10/28/2016 6:05 PM

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

Death Date and Time: 11/2/2016 12:59 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: Natural Causes/Illness

Medical Cause of Death:

Medical Cause of Death:

Ischematic heart disease
Hepatic cirrhosis, hepatitis B and C, Heroin Abuse

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?:	Don\'t know

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

Means of Death:	Not applicable; cause of death was intoxication or illness/natural causes

Location / Custody Information

Where did the event causing the death occur?

Street Address:	127 N. Woodrow Lane	City:	Denton
County:	Denton	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: 10/28/2016 6:05 PM

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:

FTA-POSS CS PG 1

Offense 2:

Offense 3:

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 October 30, 2016, at approximately 1115 hours, Officer Taylor Dobson #4328 observed Inmate Eugenio, Michael Ryan SO#19210 attempting to urinate on the low side restroom wall in Pod 12. Officer Dobson approached Inmate Eugenio and guided him to the toilet. Inmate Eugenio sat down on the toilet with his pants still on. Inmate Eugenio struggled to prop himself while sitting on the toilet. Officer Dobson then observed Inmate Eugenio slump to the back of the toilet and noticed a brown liquid coming from his mouth. Officer Dobson called via radio a medical emergency in Pod 12 at approximately 1121 hours. Responding Detention Staff removed Inmate Eugenio from the toilet and checked for a pulse. Responding Detention Staff failed to find a pulse on Inmate Eugenio and began resuscitation efforts. Denton County Correctional Health Officers arrived and continued resuscitation efforts. Denton Fire and EMS Personnel arrived at approximately 1133 hours and took over resuscitation efforts. Inmate Eugenio was transported to Denton Regional Medical Center. At approximately 1300 hours, Inmate Eugenio was placed on a ventilator. On November 1, 2016, the warrant on Inmate Eugenio was withdrawn andhe was released from custody at 1020 hours.On November 2, 2016, at approximately 1259 hours, Inmate Eugenio expired.