KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	18-445-PF	Version Type:	AMENDED
Report Date:	9/20/2018 12:45 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Harris County Sheriff's Dept.	Agency Address:	1200 Baker Street
Agency City:	Houston	Agency State:	TX
Agency Zip:	77002		

Director Information

Director Salutation:	Sheriff	Director First Name:	Ed
Director Middle Name:			
Director Last Name:	Gonzalez		
Reporter Name:	Jeffery Vickery	Reporter Email:	jeffery.vickery@sheriff.hctx.net

Decedent Information

Identity of Deceased

First Name: Ricardo

Middle Name: Javier

Last Name: Vazquez

Suffix:

Date of Birth: 12/11/1982 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 35

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

Date/Time of Custody or Incident: 6/2/2018 3:39 PM

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

Death Date and Time: 6/4/2018 2:00 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: Accidental

Medical Cause of Death:

Medical Cause of Death:

Combined toxic effects of methamphetamine and cocaine

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?: Decedent

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: Unknown

Location / Custody Information

Where did the event causing the death occur?

Street Address:	16943 Summer Crossing Ln	City:	Houston
County:	Harris	Zip:	77084

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

Location Category: Residence/Home

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

Type of Custody: Private Facility

Specific type of custody/facility:

Specific Type of Custody/Facility:

Hospital/Infirmary

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:

Entry Date Time N/A: ☑

Where did the death occur?

Death Location: Medical facility

General Information

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

Other Agencies Respond?: No

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:

N/A

Offense 2:

Offense 3:

Were the Charges:: Not filed at time of death

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

Type of Offense: Other, specify

Type of Offense, Other:

Family Disturbance

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: No

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

Attempt to Injure Others?: Unknown

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

Appear intoxicated (alcohol or drugs): Yes

Make suicidal statements?: No

Exhibit any mental health problems?: Unknown

Exhibit any medical problems?: Yes

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

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

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

Under Restraint:	Yes, mark which restraint devices were used

Type of restraint

Type of Restraint:	Handcuffs; Leg Shackles

Summary of Incident

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

Summary:

On June 2, 2018, Harris County Sheriff's Office deputies responded to a Family Disturbance involving the decedent and his girlfriend. The decedent advised deputies he ingested and inhaled narcotics and was in an argument with his girlfriend. Deputies observed the decedent's behavior to be erratic and determined him to be in crisis. Deputies handcuffed the decedent and attempted to transport him to the Neuro Psychiatric Center for psychiatric intervention and filing of an Emergency Detention Order. During transport, the decedent began hallucinating and aggressively kicking the back door. The deputy pulled over and attempted to re-secure the decedent, and he attempted to escape custody. The deputy deployed his Taser and requested EMS. The decedent was placed back into the police vehicle as another deputy arrived. The decedent became aggressive again and tried to exit the back seat. The arriving deputy drive-stunned the decedent to gain compliance. EMS medically cleared the decedent, and advised they would not transport him based on his highly combative behavior. Leg restraints were applied, and the decedent was transported to Memorial Hermann Hospital. The deputy completed the Emergency Detention Order and departed.

On June 4, 2018, the decedent was pronounced deceased at Memorial Hermann Hospital.