KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	16-10-CJ	Version Type:	ORIGINAL VERSION
Report Date:	12/15/2016 10:40 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Webb County Sheriff's Dept.	Agency Address:	902 Victoria Street
Agency City:	Laredo	Agency State:	TX
Agency Zip:	78040		

Director Information

Director Salutation:	Commander	Director First Name:	Ponce
Director Middle Name:			
Director Last Name:	Treviño		
Reporter Name:	Ponce Treviño	Reporter Email:	ptrevino@webbcountytx.gov

Decedent Information

Identity of Deceased

First Name: Federico

Middle Name:

Last Name: Reyes

Suffix:

Date of Birth: 9/20/1977 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 39

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

Date/Time of Custody or Incident: 11/15/2016 7:30 PM

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

Death Date and Time: 12/15/2016 8:42 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 pending

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

Could not be

Manner of Death: determined

Medical Cause of Death:

Medical Cause of Death:

Pending Autopsy (Suicide 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: No

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; Unknown

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:	1001 Washington Street	City:	Laredo
County:	Webb	Zip:	78040

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

Location Category:	Law Enforcement Facility

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 - single 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:	11/15/2016 7:30 PM

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?: Yes

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:

Aggravated Sexual Assault (F1) multiple counts

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: Child Abuse

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?: No

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?:	No
Exhibit any mental health problems?:	No	Exhibit any medical problems?:	No

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?:	No
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:	No
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:	No

Summary of Incident

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

Summary:

On Thursday December 15, 2016 at approximately 7:54pm officers from the Webb County Sheriff’s Office Jail responded to a suicide in progress for a male subject housed in an administrative protective segregation cell (4I). This male subject used his standard issued inmate uniform to hang himself from the shower rod inside his cell. Officer immediately began CPR on this individual and continued this until EMS arrived on scene and took over. EMS transported this inmate to Laredo Medical Center where doctors continued to work on him until he was pronounced dead at 8:42pm.