KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	17-409-CJ	Version Type:	ORIGINAL VERSION
Report Date:	8/15/2017 10:40 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Dallas County Sheriff's Dept.	Agency Address:	133 N. Riverfront Blvd.
Agency City:	Dallas	Agency State:	TX
Agency Zip:	75207		

Director Information

Director Salutation:	Sheriff	Director First Name:	lupe
Director Middle Name:			
Director Last Name:	valdez		
Reporter Name:	TERESA HERNANDEZ	Reporter Email:	tahernandez@dallascounty.org

Decedent Information

Identity of Deceased

First Name: CRAWFORD

Middle Name: COLLETTE

Last Name: LANE

Suffix: JR

Date of Birth: 12/26/1956 Sex: Male

Race: Anglo or White

Age At Time Of Death: 60

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

Date/Time of Custody or Incident: 6/16/2017 12:00 AM

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

Death Date and Time: 7/27/2017 10:10 PM

Manner / Cause of Death

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

Medical Examiner/Coroner Evaluation?: No, evaluation not planned

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

Manner of Death: Natural

Medical Cause of Death:

Medical Cause of Death:

HEART ATTACK

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

Medical Treatment: Yes

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

Who caused the death?: Not applicable

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?: Pre-existing medical condition

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

Means of Death: Not applicable, cause of death was illness/natural cause

Location / Custody Information

Where did the event causing the death occur?

Street Address:	111 W. Commerce St. Dallas County Jail (Gill-Hernandez Medical Jail Facility)	City:	Dallas
County:	Dallas	Zip:	75207

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:
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:	6/16/2017 12:00 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?: 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:

Aggravated Assault with a Deadly Weapon

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: Violent Crime Against Persons

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: Unknown

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): Unknown

Make suicidal statements?: Unknown

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?:	Unknown	Resist being handcuffed or arrested?:	Unknown
Physically attempt/assault officer(s):	Unknown	Gain possession of officer's weapon:	Unknown
Verbally threaten other(s) including law:	Unknown	Escape or attempt to escape/flee custody:	Unknown
Attempt gain possession officer's weapon:	Unknown		

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 June 16, 2017 Crawford Lane W/M 12/26/1956 (Decedent) was booked into the Dallas County Jail by the Dallas Police Department for an Aggravated Assault with a Deadly Weapon charge. The decedent was placed in a medical housing unit. On July 27, 2017, at approximately 7:31p.m., the decedent stated to detention officers at the jail medical facility that he was too weak to get up for his medication. At approximately 8:58 p.m., jail nurses responded to the decedent's bunk and gave him his medication. At 9:11 p.m., nurses went back to his bunk to check the decedent's vital signs and it was determined that the decedent needed to been seen by the nurse practitioner at the Jail Acute Care Facility. While being treated by the nurses practitioner, the decedent became unresponsive and CPR was started by the jail nursing staff. Dallas Fire Rescue #18 was contacted and responded to the jail. DFR paramedics took over CPR and transported the decedent to Parkland Memorial Hospital by ambulance at 9:39 p.m., and escorted by a detention service officer. The DFR ambulance arrived at PMH at 10:00 p.m., and decedent was pronounced deceased at 10:10 p.m. by Doctor Marshall Isaac, PMH. Detective T. Trout notified the Medical Examiner's Office of the death under ME Service #17-13423. ME Field Agent Bryan informed Det. Trout that there would NOT be any Autopsy due to the medical conditions that existed. The decedent's next of kin was notified by the charge nurse at PMH of the death. Dallas County Sheriff's Department custodial death report is being completed under service #17-079329.