KEN PAXTON
ATTORNEY GENERAL of TEXAS

# CUSTODIAL DEATH REPORT

## Agency Information

| | | | |
|---|---|---|---|
| CDR Number: | 17-462-CJ | Version Type: | ORIGINAL VERSION |
| Report Date: | 9/8/2017 1:50 PM | Status: | Submitted |

### Agency/Facility Information

| | | | |
|---|---|---|---|
| Agency Name: | Brazoria County Sheriff's Office | Agency Address: | 3602 County Road 45 |
| Agency City: | Angleton | Agency State: | TX |
| Agency Zip: | 77515 | | |

### Director Information

| | | | |
|---|---|---|---|
| Director Salutation: | Sheriff | Director First Name: | Charles |
| Director Middle Name: | S | | |
| Director Last Name: | Wagner | | |
| Reporter Name: | Stephen Buchanan | Reporter Email: | stephenb@brazoria-county.com |

## Decedent Information

### Identity of Deceased

First Name: Frank

Middle Name: Matthew

Last Name: Pena

Suffix:

Date of Birth: 4/19/1957 Sex: Male

Race: Hispanic or Latino

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: 8/3/2017 12:00 PM

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

Death Date and Time: 8/28/2017 5:00 PM

## Manner / Cause of Death

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

Medical Examiner/Coroner Evaluation?: 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:

Frank Matthew Pena was in UTMB Jennie Sealy Hospital located in Galveston, TX when he passed away. Frank Pena cause of death Acute Hypoxic respiratory failure 2/2 to hepatopulmonary syndrome complicated by metastatic HCC. Doctor Ebrahim Mogri will sign the death certificate.

## 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?: 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: 620 Texas Ave.
City: Galveston
County: Galveston
Zip: 77550

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

Location Category: Other, specify

Other 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 - 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: 8/3/2017 11:58 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 Robbery

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: 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): Unknown

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?: | 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:

F. Pena was tranported to the Galveston Hospital due to medical issues. While in the hospital, F. Pena began to work to breath and had a discussion with his wife to have a DNR/DNI and to pursue comfort to alleviate his suffering. Family was by F. Pena's side when the nurse came in and advised that F. Pena had passed away.