KEN PAXTON
ATTORNEY GENERAL of TEXAS

# CUSTODIAL DEATH REPORT

## Agency Information

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|---|---|---|---|
| CDR Number: | 18-212-CJ | Version Type: | AMENDED |
| Report Date: | 7/2/2018 1:22 PM | Status: | Submitted |

### Agency/Facility Information

| | | | |
|---|---|---|---|
| Agency Name: | Travis County Sheriff's Dept. | Agency Address: | 5555 Airport Blvd. |
| Agency City: | Austin | Agency State: | TX |
| Agency Zip: | 78751 | | |

### Director Information

| | | | |
|---|---|---|---|
| Director Salutation: | Sheriff | Director First Name: | Sally |
| Director Middle Name: | | | |
| Director Last Name: | Hernandez | | |
| Reporter Name: | Scott Schroeder | Reporter Email: | scott.schroeder@traviscountytx.gov |

## Decedent Information

### Identity of Deceased

First Name: Eric

Middle Name: Michael

Last Name: Taylor

Suffix:

Date of Birth: 3/21/1994 Sex: Male

Race: Black or African American

Age At Time Of Death: 24

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

Date/Time of Custody or Incident: 7/18/2017 7:58 PM

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

Death Date and Time: 3/31/2018 5:54 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

## Medical Cause of Death:

Medical Cause of Death:

Atherosclerotic Cardiovascular Deisease

## 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 |

## 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: | 3614 Bill Price Rd | City: | Del Valle |
| County: | Travis | Zip: | 78617 |

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

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|---|---|
| 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: | 3/30/2018 5:01 PM |

### Where did the death occur?

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|---|---|
| Death Location: | Law enforcement facility/booking center |

## 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:

Agg Assault 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: 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?: | Yes | 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 | | Gain possession of officer's | |

| | | | |
|---|---|---|---|
| officer(s): | No | 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 03-31-2018 @ 17:00 hrs, Decedent was discovered lying on his cell floor non-responsive by Officer DeBerry #5400. The decedent occupied a single cell in HSE 38B, which was a Mental Health Unit. Officer DeBerry activated his emergency stat button on his radio for a medical emergency. Jail Staff responded with Jail Nursing Staff who administered AED with negative results. Austin EMS responded to the scene who took over life saving measures and later pronounced the death at 17:54 hrs by Dr. Pickett. At approximately 16:00 hrs, Officer Roman #5543 stated the decedent had intentionally flooded his cell toilet and sink causing water to exit from under the cell door. In response, jail staff turned off the water provided to the decedent's cell. At 16:47 hrs, Officer Roman went back to check on the decedent and observed the decedent lying on the floor playing with the water that was still puddled in his cell. The decedent was also slurping the water into his mouth and spitting the water out. At 16:53 hrs, Officer Roman again checked on the decedent and noticed the decedent was still lying on the floor, but was not moving. Officer Roman also noticed a small amount of blood on the back of the decedent's head. Officer Roman called to Officer DeBerry to assist with checking the decedent. Just prior to the incident all cell doors in HSE were closed and locked while the evening dinner was being distributed to each cell through the food chute. I observed an empty food tray outside the decedent cell door as I arrived on scene. Travis County Medical Officer had arrived on scene and examined the exterior of the decedent. The ME Investigator discovered a small laceration on the top of the decedent's head as well as blood saturation around the laceration. Crime Scene Specialist arrived on scene to document the scene as well as collect any evidence the Texas Ranger wanted seized. The ME's Officer seized the decedent's medications from the jail nurse. The only medication administered to the decedent was for mental health issues. The ME's Office took custody of the decedent and transported the decedent to the ME's Office where autopsy and toxicology will be completed. Manner and Cause of death pending Toxicology results.

07-02-2018
ME Report ME18-10712

Cause of death: Atherosclerotic Cardiovascular Disease
Nature of death: Natural

Dr. Satich Chundru, D.O.
Deputy Medical Examiner