KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	18-268-C	Version Type:	AMENDED
Report Date:	11/12/2018 1:11 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Corpus Christi Police Dept.	Agency Address:	PO Box 9277
Agency City:	Corpus Christi	Agency State:	TX
Agency Zip:	78469		

Director Information

Director Salutation:	Chief	Director First Name:	Michael
Director Middle Name:			
Director Last Name:	Markle		
Reporter Name:	Hollis Bowers	Reporter Email:	hollis@cctexas.com

Decedent Information

Identity of Deceased

First Name: Gerardo

Middle Name:

Last Name: Contreras

Suffix:

Date of Birth: 1/18/1972 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 46

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

Date/Time of Custody or Incident: 3/22/2018 3:39 AM

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

Death Date and Time: 3/22/2018 1:13 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:

Sudden cardiac death (ventricular dysrhythmia following a restrained procedure and application of a conducted energy device)

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

Medical Treatment: Unknown

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?: 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: Drug overdose

Location / Custody Information

Where did the event causing the death occur?

Street Address:	2917 Masterson	City:	Corpus Christi
County:	Nueces	Zip:	78415

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: Police Custody (pre-booking)

Specific type of custody/facility:

Specific Type of Custody/Facility:

Custody of Law Enforcement Personnel during/fleeing arrest

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:

Burglary

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: Crime Against Property

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): Yes

Make suicidal statements?: No

Exhibit any mental health problems?: Yes

Exhibit any medical problems?: Unknown

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:	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:	Yes, mark which restraint devices were used

Type of restraint

Type of Restraint:	Handcuffs

Summary of Incident

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

Summary:

An "unknown nature" call came in from 2914 Masterson that a subject was banging on the front door of the residence. The call later was updated that a gun was involved. Several officers arrived and attempted to get the subject into custody. He was non-compliant and physically resisted being taken into custody. He was subsequently tased and handcuffed. He became unresponsive and a medic that was already staged near the scene responded. He was transported to the hospital. He never regained consciousness and was pronounced dead the next day.