KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	18-813-CJ	Version Type:	AMENDED
Report Date:	10/10/2018 4:50 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	El Paso County Sheriff's Dept.	Agency Address:	3850 Justice Road
Agency City:	El Paso	Agency State:	TX
Agency Zip:	79938		

Director Information

Director Salutation:	Sergeant	Director First Name:	John
Director Middle Name:			
Director Last Name:	Greer		
Reporter Name:	James Belknap	Reporter Email:	jbelknap@epcounty.com

Decedent Information

Identity of Deceased

First Name: Daniel

Middle Name:

Last Name: Aguilar

Suffix:

Date of Birth: 10/9/1969 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 48

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

Date/Time of Custody or Incident: 8/8/2018 10:10 PM

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

Death Date and Time: 8/25/2018 6:28 AM

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:

Congestive Heart Failure due to Dilated Cardiomyopathy due to Chronic Alcohol Abuse

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?:	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:	12501 Montana Ave.	City:	El Paso
County:	El Paso	Zip:	79938

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 - multiple occupancy 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:	8/8/2018 10:10 PM

Where did the death occur?

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:

Probation Revocation D.W.I. 2nd

Offense 2:

Offense 3:

Were the Charges:: A probation/parole violation

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense: Alcohol / drug offense

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:

08/25/2018 Inmate AGUILAR, Daniel was being housed in a multiple occupancy cell (1311) with 5 other inmates. AGUILAR had a history of heart and several other medical conditions. At 0510hrs. Cpl. Mendoza conducted a physical check of cell block 1311. Detection Officer Oliva followed the physical check at 0515hrs. with food plates and conducted head count. At 0523hrs. Oliva advised that an inmate in 1311 had fainted and requested back up officers. Additional Officers arrived C.P.R. was started by Detention Officers and maintained until medical arrived and took over treatment. El Paso E.M.S. arrived and transported the inmate to a local area Hospital where he was pronounced dead.
The below time line was taken from the in cell block video of cell block 1300, and the body cam worn by Officer Mendoza. Cell Block camera shows Inmate Aguilar standing at the window 0518 hrs. Aguilar falls to the floor, no contact by any other inmates. 0521hrs. Officer Oliva arrives on scene, 2145hrs. C.P.R. started 0526hrs. Medical Staff on scene, 054hrs. E.M.S. on scene, 0546 E.M.S. transports to Hospital, 0628hrs. pronounced at Hospital.