KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	18-864-CJ	Version Type:	AMENDED
Report Date:	11/26/2018 3:20 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: Fischer

Middle Name:

Last Name: Catherine

Suffix:

Date of Birth: 7/29/1967 Sex: Female

Race: Anglo or White

Age At Time Of Death: 51

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

Date/Time of Custody or Incident: 9/9/2018 2:25 PM

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

Death Date and Time: 9/12/2018 8:50 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: Accidental

Medical Cause of Death:

Medical Cause of Death:

Seizure Disorder
Contributing: Remote Blunt Injury to Head
(Prior to being booked into Facility)

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?: 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: Other, specify

Means of Death Other: Accident

Location / Custody Information

Where did the event causing the death occur?

Street Address:	601 E. Overland	City:	El Paso
County:	El Paso	Zip:	79902

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:	9/9/2018 2:25 PM

Where did the death occur?

Death Location:	Dead on arrival at medical facility

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:

Credit Card Abuse

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: 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): 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

Resist being handcuffed or

standoff?:	No	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:

09/12/2018 Inmate Fischer, Catherine was being housed in a multiple occupancy cell (114) with a total of two other inmates.
Fischer did have a injury to the back of her head which was reported at booking stated the injury was prior to her arrest, she
Was cleared medically. At 8:50AM. Officer Rillo was escorting facility Nurse Abundis, Rillo was conducting physical checks and
Nurse Abundis was going to perform a PPD on Inmate Fischer. Officer Rillo called for Fischer to come out of her cell and meet
with the Nurse, Fischer did not reply. Officer Rillo entered the cell and found Fischer laying on her bunk unresponsive. Additional
Officers and Medical Staff were requested C.P.R. was started and an A.E.D. was deployed. El Paso E.M.S. arrived and transported
the inmate to a local hospital where she was pronounced dead at 9:51am. By the Hospital Emergency Room Doctor.
Autopsy Results Pending.