KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	19-1009-CJ	Version Type:	AMENDED
Report Date:	10/18/2019 11:10 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Potter County Sheriff's Dept.	Agency Address:	13103 NE 29th
Agency City:	Amarillo	Agency State:	TX
Agency Zip:	79111		

Director Information

Director Salutation:	Sheriff	Director First Name:	Brian
Director Middle Name:	L.		
Director Last Name:	Thomas		
Reporter Name:	Kristy Phillips	Reporter Email:	sokdp@co.potter.tx.us

Decedent Information

Identity of Deceased

First Name: Genaro

Middle Name:

Last Name: Rocha

Suffix:

Date of Birth: 9/18/1971 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 47

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

Date/Time of Custody or Incident: 7/21/2019 5:37 AM

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

Death Date and Time: 8/4/2019 1:12 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:

Hypertensive Cardiovascular Disease

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?:	Could not be determined

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:	13103 NE 29th	City:	Amarillo
County:	Potter	Zip:	79111

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 - holding 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:	7/21/2019 5:37 AM

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:

Assault Causing Bodily Injury

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:	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?:	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?:	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:	Other device, specify
Other device, specify:	Handcuffs and the wrap safety restraint system

Summary of Incident

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

Summary:

On 8-3-19, inmate was behaving bizarrely in an isolation cell and had defecated in the cell. The inmate was removed from the cell so it could be cleaned and was being escorted to medical when he became resistive and violent. Officers placed inmate in WRAP restraint device at approximately 10:10 PM and placed him in holding cell 184 for observation. A 15-minute observation was initiated on the inmate. The inmate was checked at 15-minute intervals and was okay during that time. On 8-4-19 at 12:12 AM, officers went to the inmate to conduct a range-of-motion procedure. During the range-of-motion, the inmate continued resisting officers and force was used to restrain him. Medical officers then arrived and checked the inmate, obtained a blood pressure and cleared him to be placed back in the WRAP. Immediately after being placed back in the WRAP and while the officers and medical officers were still with him, the inmate slumped over and became unresponsive. The inmate was removed from the restraints, assessed by medical officers, and CPR began at approximately 12:34 AM. Life-saving efforts continued until EMS personnel pronounced the time of death at 1:12 AM.