KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	19-1052-CJ	Version Type:	ORIGINAL VERSION
Report Date:	10/17/2019 9:02 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Dallas County Sheriff's Dept.	Agency Address:	133 N. Riverfront Blvd.
Agency City:	Dallas	Agency State:	TX
Agency Zip:	75207		

Director Information

Director Salutation:	Sheriff	Director First Name:	Marian
Director Middle Name:			
Director Last Name:	Brown		
Reporter Name:	Youashavion Williams	Reporter Email:	yowilliams@dallascounty.org

Decedent Information

Identity of Deceased

First Name: WILLIAM

Middle Name: NORMAN

Last Name: ALLEN

Suffix:

Date of Birth: 7/19/1964

Sex: Male

Race: Black or African American

Age At Time Of Death: 55

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

Date/Time of Custody or Incident: 1/4/2018 5:35 PM

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

Death Date and Time: 8/12/2019 8:38 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 pending

What was the manner of death? (select only one)

Manner of Death: Natural

Medical Cause of Death:

Medical Cause of Death:

Small Cell Lung Cancer.

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?: 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:	111 W. COMMERCE STREET	City:	DALLAS
County:	Dallas	Zip:	75207

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:
Hospital/Infirmary

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:	1/4/2018 5:35 PM

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:

CAPITAL MURDER

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):	Unknown	Make suicidal statements?:	Unknown
Exhibit any mental health problems?:	Unknown	Exhibit any medical problems?:	Yes

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:	Yes, mark which restraint devices were used

Type of restraint

Type of Restraint:	Leg Shackles

Summary of Incident

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

Summary:

On December 20, 2018, Dallas County Inmate Allen, William Norman B/M 07/19/1964 was seen in the Dallas County Jail Acute Care Clinic for severe abdominal pain and was referred to Parkland Memorial Hospital (PMH). He was treated for a small bowel obstruction related to a remote gunshot wound from 1988, and incidentally was found to have a lung mass that was determined to be Small Cell Lung Cancer with metastasis to several lymph nodes, multiple bones, and adrenal glands.

On July 19, 2019, at approximately 9:30 a.m., it was determined that Allen needed to be transported to Parkland Memorial Hospital (PMH) via van for treatment at the "Palliative Care Clinic". Allen was later transported to PMH Emergency Room where he was admitted to room 12-633. During the time span of July 19, 2019 until August 12, 2019, Allen remained in the hospital for pain control and severe weakness. Allen agreed to a Do-Not-Resuscitate code status given the terminal nature of his illness. On August 12, 2019, at approximately 8:39 p.m., Allen was pronounced deceased by Dr. Dallas Abdallahi.

On August 15, 2019, at approximately 03:28 p.m., Detective Y. Williams #936 with the Dallas County Sheriff -Criminal Investigation Section contacted the Dallas County Medical Examiner's Office and spoke with Medicolegal Death Investigator Krista Troup. Troup stated advised that Allen was treated for Hypertensive and Atherosclerotic Cardiovascular Disease and that the underlying cause of death was Small Cell Lung Cancer.

On August 15, 2019, an external examination was performed by the Dallas County Medical Examiner's Office.

The manner of death was declared Natural. The lead investigating agency is the Dallas County District Attorney's Office.

Dallas Sheriff Office Service number 19-077920
Dallas County Medical Examiner IFS 19-14781