KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	19-320-MJ	Version Type:	AMENDED
Report Date:	10/7/2019 3:13 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Texas City Police Dept.	Agency Address:	1004 9th Ave. North
Agency City:	Texas City	Agency State:	TX
Agency Zip:	77590		

Director Information

Director Salutation:	Chief	Director First Name:	Joe
Director Middle Name:			
Director Last Name:	Stanton		
Reporter Name:	Jess Colwell	Reporter Email:	jcolwell@texas-city-tx.org

Decedent Information

Identity of Deceased

First Name: Christopher

Middle Name: Steven

Last Name: McHenry

Suffix:

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

Race: Black or African American

Age At Time Of Death: 49

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

Date/Time of Custody or Incident: 4/3/2019 3:37 AM

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

Death Date and Time: 4/3/2019 3:37 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:

Autopsy results listed cause of death as an accident, drug toxicity. Galveston County Medical Examiners Office report ME-01-2019-212

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

Medical Treatment: Not Applicable

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: Drug overdose

Location / Custody Information

Where did the event causing the death occur?

Street Address:	1004 9th Ave N	City:	Texas City
County:	Galveston	Zip:	77590

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:	Municipal Jail

Specific type of custody/facility:

Specific Type of Custody/Facility:
Jail - detox 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:	4/3/2019 1:24 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:

Warrant Arrest for Possession of a Controlled Substance Galveston County JP2 $250,00 bond Warr# 19JP20034

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: Other, specify

Type of Offense, Other:

Warrant for narcotics possession

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?:	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?:	Unknown
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:

The deceased (Christopher McHenry) was found unresponsive in a detox cell at about 0337hrs on 4-3-19. EMS was called to the scene and CPR was administered. EMS advised that he was deceased at 0344hrs. The cause of death is unknown at this time.

I was advised of the in custody death by Capt. Spottedbear at 0405hrs on 4-3-2019. I instructed him to have the local Texas Ranger (James Wilkins) contacted as well as the Medical Examiners office and District Attorneys Office. I arrived at the police department at about 0450hrs and made contact with Ranger Wilkins. The investigation was turned over to the Ranger.

Jess Colwell
Asst. Chief
Texas City Police Department