KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	20-76-CJ	Version Type:	AMENDED
Report Date:	7/28/2020 1:26 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Jefferson County Sheriff's Dept.	Agency Address:	5030 Hwy 69S
Agency City:	Beaumont	Agency State:	TX
Agency Zip:	77705		

Director Information

Director Salutation:	Sheriff	Director First Name:	Zena
Director Middle Name:			
Director Last Name:	Stephens		
Reporter Name:	John Shauberger	Reporter Email:	john.shauberger@jeffersoncountytx.gov

Decedent Information

Identity of Deceased

First Name: Joseph

Middle Name: Franklin

Last Name: Postula

Suffix:

Date of Birth: 4/27/1970 Sex: Male

Race: Anglo or White

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: 1/21/2020 12:28 PM

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

Death Date and Time: 1/24/2020 4:41 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:

Complications of chronic alcoholism with hepatic cirrhosis.

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:	5030 Hwy 69 S	City:	Beaumont
County:	Jefferson	Zip:	77704

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:	1/21/2020 12:28 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:

DWI - 3rd

Offense 2:

Offense 3:

Were the Charges:: Convicted

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?:	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:	Handcuffs

Summary of Incident

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

Summary:

On 1/21/2020 at about 1228 hours, Joseph Postula entered the Jefferson County Correctional Facility after being committed to 10 days jail and hold for SAFP. Upon entry into the facility Postula was screened by medical staff for intake. Medical screening indicated upon complaint of abdominal swelling that Posutla was not physically well enough for housing in the Correctional Facility and was transported to Baptist hospital located at 3080 College St. in Beaumont Texas for treatment. Postula was admitted into the hospital and remained under doctor's care. On 1/24/2020 at about 0430 hours Postula complained of difficulty breathing to the corrections officer supervising him. The corrections officer immediately notified medical staff at the hospital. The medical staff began treating Postula who became unresponsive. At about 0441 Postula was pronounced deceased by the attending physician.