KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	23-137-CJ	Version Type:	ORIGINAL VERSION
Report Date:	2/7/2023 2:39 PM	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:	TERESA HERNANDEZ	Reporter Email:	tahernandez@dallascounty.org

Decedent Information

Identity of Deceased

First Name: Hubert

Middle Name: Earl

Last Name: Lawson

Suffix:

Date of Birth: 11/25/1940 Sex: Male

Race: Anglo or White

Age At Time Of Death: 82

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

Date/Time of Custody or Incident: 5/10/2022 2:41 PM

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

Death Date and Time: 1/27/2023 11:54 AM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner Evaluation?: No, evaluation not planned

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

Manner of Death: Natural

Medical Cause of Death:

Medical Cause of Death:

Hypoxemia Respirator Failure.

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?: 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:	5200 Harry Hines Blvd.	City:	Dallas
County:	Dallas	Zip:	75235

What location category best describes where the event causing the death occurred?

Location Category: Other, specify

Other Location Category:

Parkland Memorial Hospital.

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:

Entry Date Time N/A: ☑

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:

Insufficient Bond - Agg Assault

Offense 2:

Harassment By Person in Correctional Facility.

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?: Unknown

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):	Unknown	Gain possession of officer's weapon:	Unknown
Verbally threaten other(s) including law:	No	Escape or attempt to escape/flee custody:	No
Attempt gain possession officer's weapon:	Unknown		

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 May 10, 2022 at approximately 2:41 pm, Department of Veteran Affairs Police Department arrested decedent (Hubert Lawson 11-25-1940) and booked him into the Dallas County Jail for two charges for Insufficient Bond - Aggravated Assault Deadly Weapon, one charge for Insufficient Bond - False Statement to Police, and on charge for Harassment By Person in Correctional Facility.
On September 12, 2022, the decedent was transported and admitted to Parkland Memorial Hospital for medical treatment. At Parkland Memorial Hospital the decedent was being administered oxygen, on a respirator, and had a do not resuscitate order.
On January 27, 2023 at approximately 11:54 am., Parkland Memorial Hospital, Doctor Noah Liwag pronounced the decedent deceased. Doctor Liwag determined the cause of death was Hypoxemia Respirator Failure. The decedent's wife was notified by medical staff of the death. Dallas County Medical Examiner informed us no autopsy will be conducted due to decedent's known medical history per the attending physician.