KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	23-983-CJ	Version Type:	AMENDED
Report Date:	11/14/2023 9:06 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:	TERESA HERNANDEZ	Reporter Email:	tahernandez@dallascounty.org

Decedent Information

Identity of Deceased

First Name: Mario

Middle Name:

Last Name: Rios

Suffix:

Date of Birth: 7/10/1969 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 54

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

Date/Time of Custody or Incident: 6/29/2023 11:39 AM

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

Death Date and Time: 7/23/2023 8:16 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:

Chronic Ethanolism and its sequelae.

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: Other, specify

Means of Death Other: Natural.

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: Other, specify

Other Location Category:

Medical 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 - multiple occupancy 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: 6/29/2023 11:39 AM

Where did the death occur?

Death Location: Elsewhere, specify

Death Location Elsewhere:

Parkland Memorial Hospital.

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 - Theft Prop>=$2,500<$30K

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: Crime Against Property

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?:	Unknown
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:	Leg Shackles

Summary of Incident

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

Summary:

On Saturday July 22, 2023, at approximately 9:55 p.m., a Dallas County Sheriff Detention Service Officer (DSO) was conducting a physical round at the Gill-Hernandez Medical Facility tank NG01, located within the Dallas County North Tower Jail Facility, 111 W. Commerce Street, Dallas, Dallas County, Texas 75207-4313. During this time, the DSO observed Dallas County Inmate Mario Rios W/M 07/10/1969 (Decedent) Booking Number 23025878 with what appeared to be blood coming from his mouth. Medical assistance was requested. The Decedent was assigned as a Medical status inmate at the Gill-Hernandez Medical Facility located within the Dallas County North Tower Jail Facility.
At approximately 9:58 p.m., Parkland Jail Health Medical Staff Members responded to the Decedent's bedside and moments later, initiated chest compressions. At approximately 10:17 p.m., Dallas Fire Rescue

personnel arrived to Rios's bedside, they continued chest compressions, and subsequently transported the Decedent to Parkland Memorial Hospital.
On Sunday, July 23, 2023, at 8:16 a.m., Parkland Memorial Medical Doctor Haley Belt pronounced Mario Rios as deceased and diagnosed him with Cardic Arrest with underlying Hemorrhagic Shock. On Monday July 24, 2023, an autopsy was performed by Medical Examiner Steve Hastings with the Dallas County Medical Examiner's Office. The results of the examination are currently pending.
DSO SVC #23-041501
Dallas County Medical Examiner ISF#23-14108.

Southwestern Institute of Forensic sciences at Dallas
Office of the Medical Examiner
Autopsy Report

Decedent True Name: Rios Reynoso, Mario

FINDINGS:
I. Chronic ethanolism and its sequelae:
A. Cirrhosis:
1. Two ruptured esophageal varices with gastrointestinal hemorrhage.
2. Anasarca.
3. Ascites.
4. Serosanguineous fluid in pleural cavities.
5. Jaundice and scleral icterus.
6. Cholelithiasis.
7. Medical records document that the decedent had cardiac arrest in the medical unit of a jail. He was transported to a hospital where there was return of spontaneous circulation. He was found to have an upper gastrointestinal hemorrhage, acute kidney failure, coagulopathy, and hyponatremia. His hemoglobin on 07/23/2023 at 3:34 was 5.7 g/dL. He underwent an additional cardiac arrest and was declared dead:
a. Focally organizing pneumonia.
8. Medical records document history of alcohol use disorder and decompensated cirrhosis. medical records document that serology for hepatitis B and C viruses was negative.
II. Diabetes mellitus (per medical history).
III. Evidence of attempted resuscitation.

CONCLUSIONS:
Based on the case history that was reported to me and the autopsy findings, it is my opinion that Mario Rios Reynoso, a 54-year-old male, died as a result of chronic ethanolism and its sequelae.

MANNER OF DEATH: Natural

Stephen M. Hastings, M.D.
Medical Examiner
08-29-2023