KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-1223-CJ	Version Type:	ORIGINAL VERSION
Report Date:	8/20/2024 4:36 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Randall County Sheriff's Dept.	Agency Address:	9100 S. Georgia St.
Agency City:	Amarillo	Agency State:	TX
Agency Zip:	79118		

Director Information

Director Salutation:	Sheriff	Director First Name:	Christopher
Director Middle Name:			
Director Last Name:	Forbis		
Reporter Name:	Matt Stockstill	Reporter Email:	mstockstill@rc-sheriff.com

Decedent Information

Identity of Deceased

First Name: Michael

Middle Name: Glenn

Last Name: Stewart

Suffix:

Date of Birth: 7/8/1948 Sex: Male

Race: Black or African American

Age At Time Of Death: 76

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

Date/Time of Custody or Incident: 12/26/2023 1:33 PM

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

Death Date and Time: 7/23/2024 4:45 PM

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:

Acute renal failure with sepsis and septic shock

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

Medical Treatment: No

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: 1501 Coulter St.
City: Amarillo
County: Potter
Zip: 79106

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

Location Category: Other, specify

Other Location Category:

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: 7/3/2024 6:00 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:

Poss Control Substance PG1/1b <1gram

Offense 2:

Unl Poss Firearm by Felon

Offense 3:

Poss Drug Paraphernalia

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:

Traffic

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?:	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:	No

Summary of Incident

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

Summary:

Michael Glenn Stewart black male 07/08/1948 was booked into Randall County Jail on 12/26/2023 approximately 7:30pm.

On 07/03/2024 at approximately 1730 POD Officer Perez notified medical that Michael Stewart had not drank or ate anything all day and that he has slept all day. Medical Officer K. Thomas responded to POD and attempted several times to obtain vital signs on Stewart. First blood pressure was 52/36 with a pulse ranging from 40 to 120 BPM. Once he was in the Medical department the second set of vitals were 54/42 and she was no longer able to palpate radial pulses. Stewart’s oxygen saturation was decreasing to the low 80’s. Medical Thomas asked Medical Bradford for assistance. Medical Bradford assisted and found that Stewart was a total assist for everything and due to his current condition she made the call to have an Ambulance take Stewart to the hospital.

Inmate Stewart was transported by Ambulance to North West Texas Hospital. Inmate Stewart was released from custody on PR Bonds 07/03/2024 10:55pm.
Inmate Stewart died 07/23/2024 4:45pm.