KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-1373-CJ	Version Type:	AMENDED
Report Date:	9/17/2024 12:48 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Bexar County Sheriff's Office	Agency Address:	200 N. Comal
Agency City:	San Antonio	Agency State:	TX
Agency Zip:	78207		

Director Information

Director Salutation:	Sheriff	Director First Name:	Javier
Director Middle Name:			
Director Last Name:	Salazar		
Reporter Name:	gary wigal	Reporter Email:	gary.wigal@bexar.org

Decedent Information

Identity of Deceased

First Name: Paul

Middle Name: Anthony

Last Name: Sarabia

Suffix:

Date of Birth: 8/14/1974 Sex: Male

Race: Anglo or White

Age At Time Of Death: 50

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

Date/Time of Custody or Incident: 9/1/2024 12:29 AM

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

Death Date and Time: 9/6/2024 10:46 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 Liver Cirrhosis

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: 200 N. Comal
City: San Antonio
County: Bexar
Zip: 78207

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

Location Category: Other, specify

Other Location Category:

Unknown, pending autopsy to determine what caused the death.

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: 9/1/2024 12:29 AM

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:

THEFT PROP <$2,500 2/MORE PREV CONV

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?: Unknown

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?: 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?:	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:

On Thursday, September 05, 2024, at approximately 1600 hours, Inmate Sarabia, Paul Anthony #528184 was transported to University Hospital by ambulance, due to a immediate medical emergency. Inmate was intubated and underwent various tests and medical services, in an attempt to preserve his life. On September 06, 2024, the University Hospital medical staff reported the medical condition of Inmate Sarabia was deteriorating. The inmate's father, Paul Sarabia, signed a do not resuscitate (DNR) for Inmate Sarabia. At approximately 1030 hours, the dialysis machine and other medical devices were removed from Inmate Sarabia. On September 06, 2024, at 1046 hours, the inmate was pronounced deceased by Dr. Grayson Hobart-Means, MD. Dispatch was notified and Criminal Investigator Sgt. M. Jarzombek arrived at approximately 1214 hours. Offense report 2024-BCSO-019858 was generated. University Hospital contacted the Medical Examiner. The remains of Inmate Sarabia were relocated to the University Morgue at 1545 hours, pending arrival of the Medical Examiner.