KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-1442-CJ	Version Type:	ORIGINAL VERSION
Report Date:	10/9/2024 4:20 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Galveston County Sheriff's Dept.	Agency Address:	601 54th St., Ste 2100
Agency City:	Galveston	Agency State:	TX
Agency Zip:	77551		

Director Information

Director Salutation:	Sheriff	Director First Name:	Henry
Director Middle Name:			
Director Last Name:	Trochesset		
Reporter Name:	Cody Schlageter	Reporter Email:	cody.schlageter@co.galveston.tx.us

Decedent Information

Identity of Deceased

First Name: Saul

Middle Name:

Last Name: Vargas

Suffix:

Date of Birth: 7/10/1985 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 39

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

Date/Time of Custody or Incident: 9/2/2024 9:45 PM

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

Death Date and Time: 9/10/2024 11:53 PM

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 pending

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

Manner of Death: Pending autopsy results

Medical Cause of Death:

Medical Cause of Death:

Cardiopulmonary arrest 2/2 aspiration (from UTMB discharge summary page).

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?:	Unknown whether decedent sustained a fatal injury

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?:	Unknown

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:	Under investigation.

Location / Custody Information

Where did the event causing the death occur?

Street Address:	5700 Ave H	City:	Galveston
County:	Galveston	Zip:	77550

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:	9/2/2024 9:45 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?: Yes

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:

Burglary of Vehicle

Offense 2:

Evading Arrest Detention w/vehicle

Offense 3:

N/A

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: Unknown

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?:	Unknown

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Barricade self or initiate standoff?:	Unknown	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:	Unknown	Escape or attempt to escape/flee custody:	Unknown
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 09/10/2024, at approximately 4:57 p.m. a use of force occurred with inmate Saul Vargas, who was housed in the male FSP area. When his cell door was opened to give a mattress, he pushed his way past two deputies, who immediately began to restrain him in the middle of the dayroom. Other staff, including a sergeant and lieutenant assisted and the inmate was eventually placed back into the cell, where he continued to resist. Once his restraints were removed, staff exited the cell at approximately 5:08 p.m. At approximately 5:28 p.m. on 09/10/2024, staff entered the cell and observed inmate Vargas to be non-responsive. Jail staff immediately began life safety measures and on-site medical staff began assisting shortly after. Life safety measures were continued as first responders and EMS arrived. Inmate Vargas was transported to the University of Texas Medical Branch hospital (Galveston) via EMS, where he is currently intubated and admitted to ICU. Galveston County CID, ID and DA's Office as well as the Texas Rangers Office made scene.