KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-1616-C	Version Type:	ORIGINAL VERSION
Report Date:	12/12/2024 9:16 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Texas City Police Dept.	Agency Address:	1004 9th Ave. North
Agency City:	Texas City	Agency State:	TX
Agency Zip:	77590		

Director Information

Director Salutation:	Chief	Director First Name:	Landis
Director Middle Name:			
Director Last Name:	Cravens		
Reporter Name:	Manuel Johnson	Reporter Email:	mjohnson@texascitytx.gov

Decedent Information

Identity of Deceased

First Name: Ornelas

Middle Name: Berto

Last Name: Rego

Suffix: Jr

Date of Birth: 9/28/1979 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 45

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

Date/Time of Custody or Incident: 10/28/2024 6:38 AM

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

Death Date and Time: 10/28/2024 8:30 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 pending

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

Pending autopsy

Manner of Death: results

Medical Cause of Death:

Medical Cause of Death:

Pending autopsy results

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?: Decedent

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: Drug overdose

Location / Custody Information

Where did the event causing the death occur?

Street Address:	5700 Ball St	City:	Galveston
County:	Galveston	Zip:	77551

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:	Police Custody (pre-booking)

Specific type of custody/facility:

Specific Type of Custody/Facility:
Custody of Law Enforcement Personnel subsequent to arrest

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:	10/28/2024 7:09 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?:	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:

Resist Arrest Search Transport

Offense 2:

Criminal Trespass

Offense 3:

Public Intoxication

Were the Charges:: Not filed at time of death

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense: Alcohol / drug offense

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):	Yes	Make suicidal statements?:	No
Exhibit any mental health problems?:	No	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?:	Yes
Physically attempt/assault officer(s):	Unknown	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	Unknown	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:	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:

TPCD was dispatched to criminal trespass at a closed city facility. Officers located male who appeared to be under the influence of an unknown substance and arrested him for public intoxication. The male resisted arrest and was transported to the Galveston County Jail for booking. The male was denied entry during booking and jail staff advised he required a medical fit for incarceration. While the male was being returned to the patrol unit a medical episode happened. The male was transported by EMS to UTMB Emergency Room for medical treatment where he was pronounced deceased at 08:30 a.m.