KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	25-675-CJ	Version Type:	ORIGINAL VERSION
Report Date:	8/28/2025 11:04 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Hidalgo County Sheriff's Dept.	Agency Address:	PO BOX 1228
Agency City:	Edinburg	Agency State:	TX
Agency Zip:	78540		

Director Information

Director Salutation:	Sheriff	Director First Name:	Jose
Director Middle Name:	E		
Director Last Name:	Guerra		
Reporter Name:	Ernesto Villarreal	Reporter Email:	ernesto.villarreal@hidalgoso.org

Decedent Information

Identity of Deceased

First Name: Romolo

Middle Name:

Last Name: Toscano

Suffix: III

Date of Birth: 4/1/1970 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 55

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

Date/Time of Custody or Incident: 7/25/2025 8:44 AM

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

Death Date and Time: 8/26/2025 11:24 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:

N/A

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: Not applicable, cause of death was illness/natural cause

Location / Custody Information

Where did the event causing the death occur?

Street Address:	1102 W. Trenton Road	City:	Edinburg
County:	Hidalgo	Zip:	78539

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:

Entry Date Time N/A: ☑

Where did the death occur?

Death Location: Elsewhere, specify

Death Location Elsewhere:

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:

Indecency with a child sexual assault

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: Crimes Against Child(ren)

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):	No	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?:	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:	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 August 26, 2025 Inmate Romolo Toscano III (04/01/1970) had been admitted into Edinburg Regional Hospital. Mr. Tosacno suffered from diabetes, hypertension, end stage renal disease, and had been on dialysis for the past year. Mr. Tosacno became unresponsive while in hospital care. Mr. Toscano was later pronounced deceased at 11:24 AM. An autopsy has been ordered pending results.