KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	25-814-C	Version Type:	AMENDED
Report Date:	10/8/2025 1:29 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Odessa Police Dept.	Agency Address:	205 N. Grant
Agency City:	Odessa	Agency State:	TX
Agency Zip:	79761		

Director Information

Director Salutation:	Chief	Director First Name:	Mike
Director Middle Name:			
Director Last Name:	Gerke		
Reporter Name:	Ryan Thompson	Reporter Email:	rthompson@odessa-tx.gov

Decedent Information

Identity of Deceased

First Name: Sergio

Middle Name: Alvarado

Last Name: Lara

Suffix:

Date of Birth: 12/6/1986 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 38

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

Date/Time of Custody or Incident: 10/3/2025 5:30 PM

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

Death Date and Time: 10/3/2025 6:05 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 are available

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

Manner of Death: Natural

Medical Cause of Death:

Medical Cause of Death:

Cardiac Arrhythmia due to cocaine abuse.

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:	1400 blk. W university Blvd.	City:	Odessa
County:	Ector	Zip:	79764

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

Location Category: Roadway/highway/street/sidewalk

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:

Entry Date Time N/A: ✓

Where did the death occur?

Death Location: Dead on arrival at 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:

Public Intoxication- Class C Misdemeanor

Offense 2:

Offense 3:

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: Medical / Mental Health assistance call

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):	Yes	Make suicidal statements?:	Unknown
Exhibit any mental health problems?:	Yes	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?:	Yes
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:	Handcuffs; Other device, specify
Other device, specify:	RIPP restraint used on legs.

Summary of Incident

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

Summary:

On 10-3-25 at approximately 4:58pm, Odessa Police responded to University and Santa Monica in reference to an unknown problem. Upon officers' arrival, there was a male subject lying in the roadway, acting erratic. The subject was detained and found to be suffering from a medical issue. Odessa Fire and Rescue were called to the scene to assist and transported the subject to Medical Center Hospital. A short time later, the male subject was pronounced deceased by medical staff at MCH.