KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	26-443-C	Version Type:	AMENDED
Report Date:	6/5/2026 8:25 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Austin Police Dept.	Agency Address:	PO BOX 689001
Agency City:	Austin	Agency State:	TX
Agency Zip:	78768		

Director Information

Director Salutation:	Chief	Director First Name:	Lisa
Director Middle Name:			
Director Last Name:	Davis		
Reporter Name:	Becky Briegel	Reporter Email:	becky.briegel@austintexas.gov

Decedent Information

Identity of Deceased

First Name: Joshua

Middle Name:

Last Name: Carrera

Suffix:

Date of Birth: 7/8/1996 Sex: Male

Race: Anglo or White

Age At Time Of Death: 29

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

Date/Time of Custody or Incident: 6/1/2026 12:21 PM

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

Death Date and Time: 6/1/2026 1:20 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: Accidental

Medical Cause of Death:

Medical Cause of Death:

Toxic effects of cocaine, methylenedioxymethamphetamine, ketamine and ethanol.

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment:	Not Applicable

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?:	Not Applicable; cause of death was accidental injury, intoxication, suicide or homicide

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:	1102 Clermont Ave	City:	Austin
County:	Travis	Zip:	78702

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

Location Category: Residence/Home

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:

N/A

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: Scene of incident

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:

Unknown - likely not charged due to primarily medical call

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?:	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	Resist being handcuffed or

standoff?:	No	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:	Handcuffs

Summary of Incident

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

Summary:

On Monday June 1, 2026, at approximately 12:23 pm, Austin Police Department (APD) officers responded to a Check Welfare Urgent call at a residence in the 1100 block of Clermont Avenue after reports of an individual experiencing a possible medical emergency. The caller reported the individual was exhibiting erratic behavior, appeared disconnected from reality, and was yelling loudly, causing concern that he could potentially harm himself or others.

When officers arrived on the scene, they located the individual and observed behavior consistent with what had been reported by the caller. The officers were able to safely secure him (handcuffs) while attempting to calm and stabilize the situation. Shortly thereafter, Austin Fire (AFD) personnel arrived and provided medical assistance. A few minutes later, the man became unresponsive, and AFD personnel immediately began life-saving measures until Austin-Travis County Emergency Medical Services (ACTEMS) arrived and continued resuscitation efforts. The handcuffs were removed when medical personnel began working on the individual. Despite extensive medical intervention, the man was pronounced deceased at 1:20 pm.