



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 19-726-C

Version Type: AMENDED

Report Date: 12/13/2019 3:57
AM

Status: Submitted

Agency/Facility Information

Agency Name: Harris County
Sheriff's Dept.

Agency Address: 1200 Baker Street

Agency City: Houston

Agency State: TX

Agency Zip: 77002

Director Information

Director Salutation: Sheriff

Director First Name: Ed

Director Middle Name:

Director Last Name: Gonzalez

Reporter Name: Jeffery Vickery

Reporter Email: jeffery.vickery@sheriff.hctx.net

Decedent Information

Identity of Deceased

First Name: Rene

Middle Name: Andres

Last Name: Rivas

Suffix:

Date of Birth: 10/16/1976

Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 42

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

Date/Time of Custody or Incident: 7/21/2019 11:22 PM

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

Death Date and Time: 7/22/2019 12:26 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 are available

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

Manner of Death: Accidental

Medical Cause of Death:

Medical Cause of Death:

Blunt force injuries

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?: Other civilian(s)

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?: Vehicle-involved death

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: Vehicle accident

Location / Custody Information

Where did the event causing the death occur?

Street Address: 13400 Westpark
Tollway

City: Houston

County: Harris

Zip: 77082

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: Medical facility

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:

DWI

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: 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?: 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?: 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?:	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: Handcuffs

Summary of Incident

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

Summary:

On 07-21-2019, Harris County Sheriff's Office deputies responded to a vehicle accident. During the crash investigation, deputies determined the driver (decedent) was operating a motor vehicle in a public place and had lost the normal use of his mental and physical faculties due to the introduction of an alcoholic beverage into his body. Deputies were transporting the driver to the Processing Center for booking and entered a toll road on-ramp. An intoxicated driver was traveling the wrong way on the toll road, attempted to exit the same on-ramp, and struck the patrol vehicle head on. Two deputies, the intoxicated driver, and the defendant (decedent) were transported to a nearby hospital. On 07-22-2019, at approximately 12:26 a.m., a doctor pronounced the defendant deceased.