



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 20-975-PF

Version Type: AMENDED

Report Date: 2/22/2021 6:22 AM

Status: Submitted

Agency/Facility Information

Agency Name: Houston Police
Dept.

Agency Address: 1200 Travis, 16th
Floor

Agency City: Houston

Agency State: TX

Agency Zip: 77002

Director Information

Director Salutation: Lieutenant

Director First Name: Melissa

Director Middle Name:

Director Last Name: Countryman

Reporter Name: Kimberly Fowler

Reporter Email: kimberly.fowler@houstonpolice.org

Decedent Information

Identity of Deceased

First Name: Angel

Middle Name: Manuel

Last Name: Domenech

Suffix: Jr.

Date of Birth: 3/4/1969

Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 51

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

Date/Time of Custody or
Incident: 7/21/2020 2:01 PM

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

Death Date and Time: 8/10/2020 3:57 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: Could not be
determined

Medical Cause of Death:

Medical Cause of Death:

Undetermined

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?: Unknown whether
decedent sustained
a fatal injury

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: Unknown

Location / Custody Information

Where did the event causing the death occur?

Street Address: 7446 Weyburn #B

City: Houston

County: Harris

Zip: 77028

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: Private Facility

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: 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:

None (Suicide 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: Other, specify

Type of Offense, Other:

Suicide 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?: 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?:	Unknown
Physically attempt/assault officer(s):	No	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:

On July 21, 2020, Houston Police officers responded to a "Suicide Just Occurred" call and upon arrival found the complainant Mr. Domenech was having a medical emergency and was not responsive to verbal commands by officers. Officers found the complainant rocking back and forth and breathing heavily. Complainant Domenech was not responding to officers and appeared incoherent. Complainant Domenech's roommates had no explanation for his strange behavior and said they found him in that condition, groaning and growling. Mr. Domenech's roommates were holding him down because they claimed he would fall when he tried to stand, and was kicking his legs. For the safety of the officers and the safety of the complainant, officers handcuffed him. Officers then requested the Houston Fire Department (HFD) make the scene so Mr. Domenech could be evaluated. Mr. Domenech was checked by HFD paramedics and the determination was made to transport him to a hospital. The Officers removed the handcuffs once Mr. Domenech was in the ambulance and after that cleared the scene. The complainant was in the Intensive Care Unit and on August 10, 2020, he passed away at 1157 hours.

The complainant was transported to the Medical Examiner's office. The ME's office advised that due to handcuffs being placed on the complainant, they were categorizing Mr. Domenech's death as a (Death in Custody).

The cause of death is still pending.

