



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 22-1148-CJ

Version Type: AMENDED

Report Date: 4/24/2023 2:25 PM

Status: Submitted

Agency/Facility Information

Agency Name: Bell County Sheriff's
Dept.

Agency Address: 104 S. Main

Agency City: Belton

Agency State: TX

Agency Zip: 76513

Director Information

Director Salutation: Sheriff

Director First Name: Eddy

Director Middle Name:

Director Last Name: Lange

Reporter Name: Shane Sowell

Reporter Email: shane.sowell@bellcounty.texas.gov

Decedent Information

Identity of Deceased

First Name: Elli

Middle Name:

Last Name: Shelvin

Suffix: Jr

Date of Birth: 8/28/1961

Sex: Male

Race: Black or African
American

Age At Time Of Death: 60

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

Date/Time of Custody or
Incident: 1/4/2022 12:56 PM

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

Death Date and Time: 8/6/2022 7:04 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:

Pending Autopsy results
1/18/2023 - Cause of Death Case: IFS-22-15661-CC
Bilateral pulmonary emboli
Deep venous thromboses
Obesity, hereditary hypercoagulability, and cardiovascular disease
Manner of death: Natural

Examining Pathologist: Chester Gwin. M.D.

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: 1201 Huey Dr.

City: Belton

County: Bell

Zip: 76513

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

Location Category: Law Enforcement
Facility

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: 8/6/2022 6:11 PM

Where did the death occur?

Death Location: Elsewhere, specify

Death Location Elsewhere:

Jail infirmary

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:

UNL Poss Firearm by Felon

Offense 2:

Poss Marij >4oz <= 5lbs

Offense 3:

Assault Causes Bodily Injury Family Member

Were the Charges:: Filed

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense: Violent Crime
Against Persons;
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): No

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 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: No

Summary of Incident

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

Summary:

On August 6, 2022 at approximate 1807 hours inmate Elli Shelvin alerted staff he was having difficulty breathing. A short time later, jail and medical staff escorted inmate Shelvin to the jail infirmary by wheelchair. Once in the jail infirmary, medical staff began assessing inmate Shelvin and he became unresponsive. Medical staff began life saving measures and were aided by local Fire and EMS upon their arrival. EMS personnel take over scene and continue life saving measures. At 1906 hours, via telephone, Dr. Booker of BSW ER Service, calls time of death with EMS. Justice of the Peace Keith Reed has ruled the time of death officially as 1904 hours and ordered an autopsy.

Pending autopsy results at this time.

Institute of Forensic Sciences at Dallas

Case: IFS-22-16-5661-CC

Office of the Medical Examiner Cause of Death Report Examining Pathologist Chester Gwin M.D.

An autopsy was performed and the cause of death is:

Bilateral pulmonary emboli

Deep venous thromboses

Obesity, hereditary hypercoagulability, and cardiovascular disease

Manner of Death: Natural

10/4/22