



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

PA Number: PA16195CJ

Report Date: 5/13/2016 11:45 AM

Status: Submitted

Agency/Facility Information

Department ID: 361

Department Type: SHERIFF

Agency Name: Harris County Sheriff's Office

Agency Number: TX1010000

Agency Phone: 7137557341

Agency Address: 1200 Baker Street

Agency City: Houston

Agency County: Harris

Agency State: TX

Agency Zip: 77002

Director Information

Director Salutation:

Sheriff

Director First Name:

Ron

Director Middle Name:

Director Last Name:

Hickman

Reporter Name: Capt. R. Taylor

Reporter Email: ronny.taylor@sheriff.hctx.nex

Location / Custody Information

Where did the event causing the death occur?

Street Address: 1401 St. Joseph
Parkway

City: Houston

County: Harris

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

Custody Type Facility:

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: 1/1/2016 11:22 AM

Where did the death occur?

Death Location: At medical facility

Death Location Elsewhere:

Decedent Information

Identity of Deceased

First Name: Lorenzo

Middle Name: Antonio

Last Name: Warren

Suffix:

Date of Birth: 11/29/1960

Sex: Male

Ethnicity: African-American

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

Death Date and Time: 5/12/2016 6:12 PM

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

Date/Time of Custody or Incident:

1/1/2016 11:22 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:

Natural Causes/Illness

Manner of Death Description:

respiratory distress

Death Reason:

Medical condition only (e.g. heart attack)

Medical Cause of Death:

Medical Cause of Death:

Acute respiratory distress syndrome

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

Medical Treatment:

Yes

Medical Treatment Description:

St. Joseph's Medical Center

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?:

Not applicable; cause of death was suicide, intoxication or illness/natural causes

Death Causer Other:

If a weapon caused the death, what type of weapon caused the death? (mark all that apply)

Type of Death Weapon:

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?:

Don't know

If death was an accident, homicide or suicide, what was the means of death?

Means of Death:

Not applicable; cause of death was intoxication or illness/natural causes

General Information

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:

Possession of Controlled Substance PG2 4g-400g

Offense 2:

Possession of Controlled Substance PG1 1g-4g

Offense 3:

Were the Charges::

Filed

What were the types of charges or reason for contact?

Type of Offense:

Injuries of Decedent

Injured By: Injured by NA

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Appear intoxicated (alcohol or drugs): No

Exhibit any mental health problems?:

Exhibit any medical problems?:

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Threaten the officer(s) involved: No

Resist being handcuffed or arrested?: No

Try to escape/flee from custody: No

Grab, hit or fight with the officer(s): No

Other Behavior:



Specify Other Behavior:

Use weapon threaten/assault officer(s): 0

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 Thursday, May 12, 2016, Inmate Lorenzo Warren SPN 00298453 died in custody at St. Joseph's Hospital located at 1401 St Joseph Parkway, in the City of Houston, Texas, 77002. Inmate Warren was pronounced deceased by attending physician Rajesh Rethnam at 1812 hours. Inmate Warren, a black male, 55 years of age had been in the custody of the Harris County Sheriff's Office since his arrest for Possession of Controlled

Substance PG2 4g-400G and Possession of Controlled Substance PG1 1g-4g with \$0 bond on January 01, 2016. Case #149357701010 and Case #149357601010 are assigned to the 183rd District Court.