

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 19-302-P

Report Date: 6/25/2019 10:21

Version Type: AMENDED

Status: Submitted

Agency/Facility Information

TDCJ/Office of the Agency Name:

Inspector General

Agency City: Huntsville

Agency Zip: 77320

1012 Veterans Agency Address: Memorial Parkway

Agency State: TX

Director Information

Director Salutation: Director Director First Name: Cris

Director Middle Name:

Director Last Name: Love

Reporter Name: Analou Sievers Reporter Email: analou.sievers@tdcj.texas.gov

Decedent Information

Identity of Deceased				
First Name:	James			
Middle Name:	Matthew			
Last Name:	Patterson			
Suffix:				
Date of Birth:	12/27/1980	Sex:	Male	
Race:	Anglo or White			
Age At Time Of Death:	38			
Date/Time of Custody (arrest, incarceration) (mm/dd/yyyy hh:mm AM/PM):				
Date/Time of Custody or Incident:				
Date/Time of Death (mm/dd/yyyy hh:mm AM/PM):				

Death Date and Time: 3/25/2019 6:28 PM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examinor/Coroner Yes, results are Evalution?: available

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

Manner of Death: Suicide

Medical Cause of Death:				
Medical Cause of Death:				
Asphyxia due to hanging by the n	neck			
Had the decedent been reca	eiving treatment for the medical condition that caused the death s jurisdiction?			
Medical Treatment:	Unknown			
If death was an accident, homicide or suicide, who caused the death?				
Who caused the death?:	Decedent			
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: Hanging, strangulation

Location / Custody Information

Where did the event causing	ng the death occur?				
		011	_		
Street Address:	2661 FM 2054	City:	Tennessee Colony		
County:	Anderson	Zip:	75884		
Marthartin artists		t annualmenth a dan	41		
vvnat location category bes	at describes where the even	it causing the dea	tn occurrea?		
	Law Enforcement				
Location Category:	Facility				
What type of custody/facilit	y was the Decedent in at th	e time of death:			
Type of Custody	Denitortion				
Type of Custody:	rememary				
Specific type of custody/fac	cility:				
	,				
	Specific Type of Custody/Facility:				
TDCJ, specify					
	TDCJ - Specify Unit:				
Coffield Unit	in the speed of the series				
Coffield Unit					
What was the time and date of the deceased's entry into the law enforcement facility where					
the death occurred (mm/do	•	no mo iam omoroc	mont rability writers		
Entry Date Time:	2/20/2019 12:00 AM				
	AIVI				
Where did the death occur?					
	Law enforcement				
Death Location:	facility/booking				

General Information

center

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:		
Aggravated Assault with a Deadl	y Weapon			
		Offense 2:		
		Offense 3:		
Were the Charges::	Convicted			
What were the types of charges or reason for contact? (Hold CTRL to select all that apply)				
Type of Offense:	Violent Crime Against Persons			
At any time during the incid display or use a weapon?	lent and/or entry i	nto the law enforcement fac	ility, did the decedent	
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?:	Unknown			
At any time during the incident and/or entry into the law enforcement facility, did the decedent:				
Appear intoxicated (alcohol or drugs):	Unknown	Make suicidal statements?:	Unknown	
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?: Unknown

Resist being handcuffed or

Unknown

Physically attempt/assault

officer(s):

Unknown

Gain possession of officer's

weapon: Unknown

arrested?:

Verbally threaten other(s)

including law:

Unknown

Escape or attempt to escape/flee custody:

Unknown

Attempt gain possession

officer's weapon:

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 March 25, 2019, Offender Patterson was found during a security check hanging by the neck with a white sheet in his cell at the unit. Security staff interceded and began life saving measures. Offender Patterson was taken to the unit's emergency room and EMS was notified. Once EMS arrived, they contacted the medical doctor at the hospital, who ordered the cessation of life saving efforts and Offender Patterson was pronounced deceased.