

KEN PAXTON ATTORNEY GENERAL OF TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 22-806-UF Report Date: 1/18/2023 12:06 PM

Version Type: AMENDED Status: Submitted

Agency/Facility Information

Agency Name: Dallas Police Dept. Agency City: Dallas Agency Zip: 75215

Agency Address:	1400 S. Lamar Street
Agency State:	ТХ

Director Information

Director Salutation: Chief

Director First Name: Eddie

Director Middle Name:

Director Last Name: Garcia

Reporter Name: Daniel Avalos

Reporter Email: daniel.avalos@dallaspolice.gov

Decedent Information

First Name:
Ladamonyon

Middle Name:
Dewayne

Last Name:
Hall

Suffix:
Suffix:

Date of Birth:
5/30/1974

Race:
Black or African
American

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

Date/Time of Custody or 5/26/2022 12:45 Incident: PM

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

Death Date and Time: 5/26/2022 2:05 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: Accidental

Medical Cause of Death:

Medical Cause of Death:

ME results, Complainant Hall died as a result of combined toxic effects of Phencyclidine, cocaine, and methamphetamine, with hypertensive and atherosclerotic cardiovascular disease, diabetes mellitus, and obesity contributing to death.

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

Medical Treatment: Yes

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 Could not be condition?: determined

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

Means of Death: Drug overdose

Location / Custody Information

Street Address:12002 Garland
RoadCity:DallasCounty:DallasZip:75228

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

Location Category: Business

What type of custody/facility was the Decedent in at the time of death:

Type of Custody: Pre-Custodial Use of Force

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?

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:

N/A

Offense 2:

Offense 3:

Were the Charges:: Not filed at time of death

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

Type of Offense: Medical / Mental Health assistance 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):		Make suicidal statements?:	No
Exhibit any mental health problems?:	Unknown	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:	N/A
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?

Yes, mark which Under Restraint: 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 May 26, 2022 at 12:45pm, the decedent who is a transgender female was involved in a disturbance call at 12002 Garland Rd, a car dealership. Officers responded to the location and began their investigation. Officers quickly determined the decedent was have an unknown medical issue and attempted to gather personal information while waiting for Dallas Fire Rescue(DFR). DFR arrived on location and began their evaluation. During the evaluation, the decedent began to remove clothing and attempted to leave the scene. Officers intervened and detained the decedent who then fell to the ground. The decedent continued to thrash about, struggle with officers and was placed in handcuffs. A short time later the descendent was moved to an ambulance for transport to the emergency room (ER). An officer rode with the ambulance to the emergency room, the decedent appeared to go unconscious and paramedics began CPR in the back of the ambulance. The descendent was then moved to a room in the ER and medical treatment continued. The emergency room doctor pronounced the death at 2:05pm. An autopsy was performed on May 27, 2022 and the results are pending. The Dallas Police Department Special investigations Unit is investigating the incident. This is an on going investigation.