ABRIDGED SUMMARY OF AN IN-CUSTODY DEATH AND FINDINGS
BY THE LOS ANGELES BOARD OF POLICE COMMISSIONERS

In-Custody Death – 053-08

Division Date Duty-On(X) Off( ) Uniform-Yes(X) No( )
Van Nuys 06/01/08

Officer(s) Involved in Use of Force Length of Service
Not applicable.

Reason for Police Contact
Subject was transported and booked at a Los Angeles Police Department jail facility for a misdemeanor warrant arrest. While there, the subject was medically treated on several occasions for chest pains. During a subsequent cell check, the subject was found non-responsive in his bunk.

Subject(s) Deceased (X ) Wounded ( ) Non-Hit ( )
Subject: Male, 53 years old.

Board of Police Commissioners’ Review

This is a brief summary designed only to enumerate salient points regarding this Categorical Use of Force incident and does not reflect the entirety of the extensive investigation by the Los Angeles Police Department (Department) or the deliberations by the Board of Police Commissioners (BOPC). In evaluating this matter, the BOPC considered the following: the complete Force Investigation Division investigation (including all of the transcribed statements of witnesses, pertinent suspect criminal history, and addenda items); the relevant Training Evaluation and Management System materials of the involved officers; the Use of Force Review Board recommendations; the report and recommendations of the BOPC; and the report and recommendations of the Inspector General. The Los Angeles Police Department Command Staff presented the matter to the Commission and made itself available for any inquiries by the Commission.

The following incident was adjudicated by the BOPC on May 12, 2009.

Because state law prohibits divulging the identity of police officers in public reports, for ease of reference, the masculine pronouns (he, his, and him) will be used in this report to refer to male or female employees.

Incident Summary

On May 31, 2008, employees at a grocery store discovered the subject lying on the bathroom floor and requested a rescue ambulance (RA). The Los Angeles Fire
Department (LAFD) responded to the scene and conducted a medical assessment on the subject. The subject was alert and oriented and advised the paramedics that he was going through heroin withdrawals. The paramedics noted that the subject had a fever and transported him to the hospital.

**Note:** According to LAFD Paramedic A, the subject advised him that he was unable to walk and was not feeling well. The subject requested to go to the hospital. The subject also stated that he had been drinking. Paramedic A observed a bottle of vodka next to the subject in the restroom.

According to LAFD Paramedic B, the subject was upset that the paramedics were disturbing him and initially refused to go to the hospital. Paramedic B indicated that they convinced the subject to go to the hospital to be checked out. Paramedic B did not recall seeing a bottle of vodka in the restroom.

While at the hospital, the subject was examined by Doctors A and B. According to Doctor A, other than looking a bit disheveled and perhaps mildly intoxicated, the subject did not show any outward signs of disease. The subject advised the doctors that he was feeling poorly due to his stopping the use of heroin and methadone. The subject also indicated that he was trying to temper the withdrawal effects by drinking alcohol. The doctors ran basic laboratory tests and allowed the subject to rest at the hospital. At some point during his stay, the subject expressed to Doctor B that he was feeling chest pains. An electrocardiogram (EKG) was conducted and the results showed no signs of irregularities.

Doctor B evaluated the subject's condition and determined that he did not require hospitalization. Doctor B advised the subject to leave the hospital; however, the subject refused to leave. The Los Angeles County (County) Police Department was notified.

At approximately 6:00 p.m., County Police Officers A, B, and C responded to the hospital. Upon arriving, medical personnel advised the officers that the subject had been discharged and was refusing to leave.

County Police Officer A returned to his police vehicle and conducted a check on the subject using the Automated Want/Warrant System. The check revealed that the subject had an outstanding arrest warrant for failing to appear on a citation for 16028 (A) VC (No Evidence of Financial Responsibility upon Request).

County Officer A returned to the emergency room and advised the subject that he was going to be arrested for his warrant. The subject was handcuffed and escorted to County Police Officer A’s police vehicle.

**Note:** According to County Police Officer C, as the subject was being escorted to the police vehicle, he stated, “[Expletive] you [Officer C]. [Expletive] you slant eye.”
According to County Police Officer A, after the subject was placed in the backseat of the police vehicle, he stated, “I don’t feel good. I want to see a doctor.” The subject would not elaborate on his condition. The officers requested a supervisor to respond to the scene. Shortly thereafter, County Police Sergeant A arrived at the hospital.

County Police Sergeant A spoke to the subject who advised Sergeant A that he (the subject) was experiencing chest pains. County Police Sergeant A directed the officers to bring the subject back to the emergency room. The subject was escorted to the emergency room, and his handcuffs were removed. An additional EKG was performed and evaluated, which did not reveal any irregularities. Doctor B documented the treatment that the subject was provided and noted that the subject was, “likely malingering with intent of hospitalization to avoid booking.” Doctor B also documented that the subject was “O.K. to book” and provided a copy of the medical report to County Police Officer A. County Police Officer A escorted the subject to his police vehicle and proceeded to transport him to a local section of the Los Angeles Police Department's (City) Jail Division.

At approximately 7:50 p.m., County Police Officer A arrived at the City jail division and presented the subject to Watch Commander Lieutenant A. The subject was then escorted to a holding bench while he waited to be booked.

**Note:** The subject stated that he understood he had a misdemeanor warrant. When Lieutenant A asked him about being sick, ill, or injured, the subject “stopped momentarily” and stated he was not. Lieutenant A then stated, “Are you sure?” and the subject replied, “Yes.” According to Lieutenant A, County Police Officer A made no mention of the subject having any medical issues.

At approximately 8:50 p.m., County Police Officer A escorted the subject to a receiving window where City Detention Officer A entered the subject’s information into the Decentralized Automated Booking Information System (DABIS) and processed his paperwork. After the DABIS process was completed, City Detention Officer B responded to the subject’s location and escorted him to the fingerprinting station. According to City Detention Officer B, three to four minutes into the fingerprinting process, the subject began having a difficult time standing up and stated that he felt dizzy. City Detention Officer B observed that the subject “looked very pale” and did not think the subject “was playing around.” City Detention Officer B escorted the subject to the dispensary for medical attention with the assistance of City Detention Officer C.

Doctor C, Correctional Nurses A and B, and Relief Correctional Nurse C were in the dispensary when the subject arrived. The subject advised that he used methadone and that the last time he used heroin was approximately one month ago. The subject also complained of chest pains. The dispensary personnel took the subject’s vital signs and conducted an EKG. According to Doctor C, there were no issues noted with the subject’s readings; however, because he complained of chest pain, Doctor C determined that the subject should be further examined at a contract hospital. An RA was requested. The paramedics assessed the subject and, after determining that his vital signs were stable,
transported the subject to a local hospital. City Officer A rode in the back of the RA and was followed by his partner, City Officer B, in his police vehicle.

**Note:** According to LAFD Paramedic A, when they conducted their assessment on the subject, “everything came back normal.” According to LAFD Paramedic B, they conducted an EKG on the subject, and the results came back as a sinus tachycardia (fast heart rate). There were no indications of the subject having a heart attack.

At the hospital, the subject was seen by Doctor D. According to Doctor D, the subject complained of withdrawal symptoms and bilateral chest pain. The subject stated that he had been on methadone and had stopped it for three days. Doctor D did not observe the subject to be showing any visible symptoms of withdrawal.

Doctor D monitored the subject for approximately four and a half hours and evaluated him for cardiac and pulmonary problems. The subject was given medication for pain and anxiety. Several tests were conducted including an EKG, chest X-ray, and blood work. The results came back as unremarkable. Doctor D advised the subject of the results. The subject stated that he felt better but was hungry. The subject was provided with food and was then cleared for booking by Doctor D.

City Officers A and B transported the subject back to the local jail facility. The subject was presented to the watch commander and then escorted to the dispensary, where he was seen by Doctor C and Nurses A and C. Nurse C took the subject’s blood pressure and noted that it was elevated. Doctor C administered two separate medications and ordered that the subject’s blood pressure be checked again several hours later. The subject was then escorted to a cell which contained four other inmates.

The subject was later brought back to the dispensary where he was seen by Correctional Nurse II D and Doctor E. Nurse D checked the subject’s blood pressure and documented a reading of 208/117. The subject was given additional medication. Doctor E ordered that the subject be brought back in two hours to have his blood pressure rechecked. The subject was then returned to his cell.

Two hours later, the subject was brought back to the dispensary. Nurse D checked the subject’s blood pressure and documented a reading of 156/93. The subject did not receive any additional medications and was returned to his cell.

Four hours later, Detention Officers D and E conducted a “sick call” procedure in which inmates listed on a Dispensary Sick Call List would be escorted to the dispensary for a checkup. The subject was examined by Nurses B and D and Doctor E. Nurse D documented a blood pressure reading of 150/94 and noted that the subject displayed “moderate tremors.” The subject advised that he was restless and was having diarrhea. The subject was given three different medications and was temporarily placed in another cell while the other inmates on the Dispensary Sick Call List were examined. At 4:30 p.m., Detention Officers D and E escorted the subject back to his earlier cell.
Half an hour later, Detention Officers D, E, and F were in the process of delivering food to the inmates. As a protocol, the inmates would be asked to get up from their beds and form a line at the cell door. The inmates in the subject’s cell lined up at the cell door with the exception of the subject, who remained in his bed. Detention Officer D asked one of the inmates to wake the subject up. Witness A walked up to the subject and observed that he was not moving and his eyes were “sitting wide open not even moving.” Witness A shook the subject, but he did not respond. Witness A stated, “You all need to get some help in here for this man. This man’s dead.”

Detention Officers D and F entered the cell while Detention Officer E stood guard at the door. Detention Officer D walked to the subject’s bed and observed that the subject’s eyes were open and his chest was not moving. Detention Officer D checked the right side of the subject’s neck for a pulse and did not detect one. Detention Officer D directed Detention Officer E to activate the alarm. Detention Officer D administered cardiopulmonary resuscitation (CPR) as detention officers responded to the cell and monitored the other inmates. Nurses B and D, equipped with the Automated External Defibrillator (AED) and an Ambu Bag, responded to the cell and took over administering CPR. Doctor E also responded and directed the detention officers to request an RA.

Nurse D attached the AED on the subject’s body and activated it on three occasions. The subject did not respond to the AED activations. The nurses continued to administer CPR and directed the detention officers to relocate the other inmates to another cell to make room for the paramedics.

LAFD personnel arrived at the cell and took over the treatment of the subject. City Officers C and D escorted the RA to the hospital. Officer D rode in the back of the RA and was followed by Officer C in his police vehicle. Doctors attempted to resuscitate the subject with negative results, and the subject was pronounced dead.

**BOPC Findings**

The BOPC recommended the following findings in this case:

- Tactics – Does not apply.
- Drawing/Exhibiting – Does not apply.
- Lethal Use of Force – Does not apply.

**Los Angeles Board of Police Commissioners’ Findings**

The BOPC reviews each Categorical Use of Force incident based upon the totality of the circumstances, namely all of the facts, evidence, statements, and all other pertinent material relating to the particular incident. In every case, the BOPC makes specific findings in three areas: Tactics of the involved officer(s); Drawing/Exhibiting/Holstering of a weapon by any involved officer(s); and the Use of Force by any involved officer(s). All incidents are evaluated to identify areas where involved officers can benefit from a
tactical debriefing to improve their response to future tactical situations. This is an effort to ensure that all officers benefit from the critical analysis that is applied to each incident as it is reviewed by various levels within the Department and by the BOPC. Based on the BOPC’s review of the instant case, the BOPC unanimously made the following findings.

**Basis for Findings**

The Chair of the Use of Force Review Board determined that the subject’s detention and arrest were consistent with acceptable standards. It was established that there was no use of force involved in the detention, arrest, or transportation of the subject. Additionally, the subject received the appropriate medical attention.

Therefore, the BOPC recommended that no findings be made for any Department personnel associated with this incident.