

## Agency Information

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CDR Number: 17-52-CJ

Version Type: AMENDED

Report Date: 2/13/2017 12:33 PM

Status: Submitted

## Agency/Facility Information

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Agency Name: Harris County Sheriff's Dept.

Agency Address: 1200 Baker Street

Agency City: Houston

Agency State: TX

Agency Zip: 77002

## Director Information

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Director Salutation: Sheriff

Director First Name: Ed

Director Middle Name:

Director Last Name: Gonzalez

Reporter Name: Ronny Taylor

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

## Decedent Information

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### Identity of Deceased

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First Name: Fredia

Middle Name:

Last Name: Martin

Suffix:

Date of Birth: 12/4/1965

Sex: Female

Race: Black or African  
American

Age At Time Of Death: 51

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

Date/Time of Custody or  
Incident: 2/6/2017 8:40 PM

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

Death Date and Time: 2/10/2017 7:06 PM

## Manner / Cause of Death

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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: Accidental

Medical Cause of Death: \_\_\_\_\_

Medical Cause of Death:

Acute phencyclidine toxicity

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

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Medical Treatment: Unknown

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

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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)

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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?

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Pre existing medical condition?: Pre-existing medical condition

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

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Means of Death: Not applicable, cause of death was illness/natural cause

## Location / Custody Information

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Where did the event causing the death occur?

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Street Address: 1200 Baker Street

City: Houston

County: Harris

Zip: 77002

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

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Location Category: Law Enforcement Facility

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

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Type of Custody: County Jail

Specific type of custody/facility:

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Specific Type of Custody/Facility:

Hospital/Infirmiry

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):

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Entry Date Time: 2/6/2017 8:40 PM

Where did the death occur?

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Death Location: Medical facility

## General Information

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Did any other law enforcement agencies respond to calls for service related to this incident?

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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?

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Offense 1:

DWI w/child in vehicle

Offense 2:

Fail Stop and Give Information (FSGI)

Offense 3:

Were the Charges:: Filed

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

Type of Offense: 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):	Unknown	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:	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?

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Under Restraint: No

## Summary of Incident

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

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### Summary:

On Friday, February 10, 2017 at approximately 1815 hours Inmate Fredia Martin was found unresponsive by staff in the 1200 Baker Street Medical holdover of FD-1. After additional medical staff arrived and further assessed her condition they immediately began chest compressions on Inmate Fredia Martin and continued the process until EMS arrived and took over. The medical staff immediately determined to send her to the nearest emergency room by ambulance. Inmate Fredia Martin was transported to St. Joseph's Hospital Emergency Care Center by the Houston Fire Department where she continued to be treated and assessed by medical staff in trauma room #2. Medical Doctor Phillip Stepaniak later pronounced Inmate Fredia Martin's death at 1906 hours due to cardiac arrest.