Sacramento Police Department Use Of Force Report

Incident Entered By: Police Sergeant Daniel Farnsworth - 2392
Assigned Investigator: [Incident pending assignment]

Incident Details

Date Received Date of Occurrence Time of Occurrence

3/6/2017 3/6/2017 13:53

Record ID # Report Number IA No

18967 17-64178 UOF2017-025

Date/Time Entered

Date/Time Entered 3/29/2017 12:33

Incident Summary

On 3/6/17 Sacramento Police Department dispatch began receiving calls at approximately 1353hrs. regarding a subject trying to fight people, acting erratically and seemed to be on drugs. From witness statements obtained later from the aforementioned callers it was determined that was the subject the callers complained about. The witnesses:
and are security guards at the medical complex located at 1201 Alhambra. Prior to SPD officers arriving both guards had encountered and described his erratic, disjointed and violent behavior. These guards merely wanted off the property they were responsible for, so when fled from them and ran out of a side door the guards resumed their normal duties.
At approximately 1434 hours, the first SPD officers arrived at the Rite Aid parking lot on the south side where was currently located. The first officer was Officer Villegas #820. All the officers involved in this event are uniformed and in marked patrol vehicles. There is no ambiguity as to whether or not a reasonable person would know that they were being approached and contacted by a duly sworn police officer in the performance of their duties. Villegas made first contact with at the very south edge of the Rite Aid parking entrance/exit. Within moments Officer Dionne #395 pulled up close and slightly behind Villegas' vehicle.
Before Officer Villegas could begin his investigation, had already assumed a fighting stance. Villegas communicated with Dionne his concerns with had already assumed a fighting stance. Villegas communicated with the intention of cutting off the angle if he are fled afoot. Villegas gave commands to he get on the ground. It is balked at the verbal command necessitating villegas to re-enforce his desires by drawing and displaying his less-lethal option; a CED. It immediately began to feign compliance, getting to his knees. It hen leapt up and ran south across L St. Dionne had opted to close the gap north and was therefore out of position to stop immediately.
As crossed L St. south bound, he ran in front of the police vehicle driven by responding Officer Hight #345. Hight exited his vehicle and ran after and Dionne headed straight for 1201 Alhambra (a building he had only an hour before been escorted from by witnesses and ran in the lobby and headed for the elevators.
Officers Dionne and Hight were delayed entry into the building by a balky automatic door. They yelled at as he stood at the elevator- fearing he would escape into the medical plaza and it's many rooms throughout 4 floors. As the lobby door opened to allow the ingress of Dionne and Hight, opted to run down the hallway.
The west hallway zig- zags at two points.
At the first corner, language at them. turned on the officers and either growled or roared but uttered no discernible then continued his westward flight.

At the second corner again turned on officers halting the chase but not the officers commands for to stop. Then turned to continue his egress. Officer Hight at this point had drawn his CED and fired off a salvo at Evidence obtained later showed that one probe acquired while the other was found in the west hallway wall.
The officers caught up to as he tried to open a locked door. Officer Hight tackled and was assisted by Officer Dionne in getting to the ground. As continued to fight and struggle in the confined space of the hallway and short alcove in front of the locked door, Dionne struggled to keep control of the left arm of Officer Hight utilized repeated drive-stuns from his CED to the fleshy parts of Side, back and general torso area. Officer Villegas arrived after had been tackled in the hallway. The three officers then attempted to subdue in a struggle that was characterized by witness as: The guy they were fighting was extremely resistant. It appeared as though he had the strength of a giant. The officers had a really hard time trying to subdue him.
During this phase of the altercation CED's in drive-stun mode were employed. According to Lt. Chan who downloaded the officers CED's, Officer Dionne's CED at various intervals was activated 4 times in rapid succession for a total 20 seconds within a minute and 14 seconds.
Officer Hight's CED was activated 5 times in a 2 minute period for a total of 24 seconds.
Officer Villegas' CED was not activated during this period.
In the melee that ensued in that small corridor it is possible that one officers CED may have been utilized by another.
According to the victim officers, follow on officers and witnesses, was seemingly un-phased by the CED deployments. So little so that Officer Villegas opted not to again deploy his CED and began utilizing a fully collapsed expandable baton on back and side. The effectiveness of such blows is debatable in the environment and spatial challenges existing within that confined area.
Officers Dionne, Hight and Villegas were physically spent when Officers Cunningham #496, Piaz #270, Harrison #980 and Spring # 1006 arrived to spell them. Officer Cunningham spent most of the event determining whether the initial officers were in medical distress.
All of these officers CED's were downloaded and examined by Lt. Chan. Only Dionne, Hight and Villegas had discharges during the event and Villegas only a 1 second burst that may be attributed to a firing malfunction earlier.
Once was subdued (fully cuffed) he continued to utilize his feet to a point that the officers spent great energy to hold his legs. Officer Womack and several other officers requested over the radio for code three fire/medic response even before had ended his resistance. Officers realized medical distress contemporaneous with the arrival of SFD medics.
As soon as exhibited distress and SFD personnel began life saving steps, Officer Womack related to me the extent of what was occurring with . I arrived minutes later.
Lt. Rogers was advised by me of the extent of injuries and he responded. Officer Southward rode with to Sutter General and maintained contact between medical staff and myself until relieved by another officer. During this period it was learned that blood work performed on indicated the presence of methamphetamine and that efforts were being made to keep his core body temperature down.
FI Rossi also took photos of all seven CED's. Lt. Chan forwarded the download information for all seven CED/TASER's via .pdf reports to Detective Macaulay and Sgt. Werner of the Homicide Team.Lt. Chan delivered Ofc. Villegas' CED to FI Rossi for booking at 2015 hours. Lt. Chan returned all other CED's to their respective users. FI Rossi also took DNA swab samples from Ofc. Villegas' CED and Expandable Straight Baton (ESB), as well as from Officers' Dionne and Hight's CED's (see Rossi supplements for details).
A call out was initiated and a canvass conducted for witnesses and surveillance video.
I conducted a briefing for investigations and management.

Incident Location

• 1201 Alhambra Blvd., Sacramento, CA 95816 - Location of Occurrence: 6 - East - Precinct: 6D

Use of Force Specific Information

Reason for Use of Force

Service Being Rendered

927 Circ.

Calls For Service

Weather Condition

Lighting Condition

Distance to Citizen

Clear

2000 2000

1 feet to 3 feet

Citizen Injured

Citizen Taken to Hospital

Citizen Arrested

Yes

Yes

No

More than 1 Citizen Involved

No

Citizen's Build

Citizen's Height

Med

5'4" to 5'6"

Officer Assessment of Citizen Condition During Incident

Drugs

Officer(s) Injured

Officer(s) Taken to Hospital

Yes

No

Reporting/Involved Citizen Information

DOB: Race: Hispanic Ethnicity: Gender: Male

Address

Phone •

Role

Types of Resistance Citizen Used Against Officer(s)

- · Physical Resistance
- · Punch/Kick
- · Other Noncompliance

Injuries sustained by this citizen

Injury	Regions	Injury Locations
Admitted to Hospital		

Charges against this Citizen

• 148(a) PC - Misdemeanor

Involved Officers

Police Officer Allison Cunningham - ABRA Number:

Assignment at time of incident: Title: Police Officer OOO/Patrol/District 6

Video Footage: [No Response]

Role

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Force used by this officer against the citizen

· Physical-Other - Was force effective: No

Force Used	Effective?	Regions	Points of contact
Physical-Other	No		

Police Officer Casey Dionne - ABRA Number:

Assignment at time of incident: Title: Police Officer OOO/Patrol/District 6

Video Footage: [No Response]

Role

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Force used by this officer against the citizen

- Twist/Wrist Lock Was force effective: No
- · Takedowns Was force effective: Yes
- Physical-Other Was force effective: Yes

Less Lethal Force used by this officer against the citizen

 CED/Taser-Touch Stun - Was Less Lethal Force Used Effective? Yes Serial # - xoo-369068 Cartridge # -

Was this a direct contact/drive stun contact? Yes # of cycles - 4
Was the cartridge attached? No
Was a follow up drive stun conducted? No
Duration of cycles Was this an accidental (unauthorized) discharge? No

Did the application cause injury? - No Area of body where device applied - Back

Statistical Information

Was this an Arc display? No

Was citizen painted with laser / red dot? No

Force Used	Effective?	Regions	Points of contact
Twist/Wrist Lock	No		
Takedowns	Yes		
Physical-Other	Yes		
CED/Taser-Touch Stun	Yes		

Injuries sustained by this officer

Injury	Regions	Injury Locations
COP/Bruising		

Police Officer Robert Harrison - ABRA Number:

Assignment at time of incident: Title: Police Officer OSS/PERSONNEL/TRAINING/FIELD TRAING

Video Footage: [No Response]

Role

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Force used by this officer against the citizen

• Physical-Other - Was force effective: Yes

Force Used	Effective?	Regions	Points of contact
Physical-Other	Yes		

Police Officer Michael Hight - ABRA Number:

Assignment at time of incident: Title: Police Officer OOO/Patrol/District 6

Video Footage: [No Response]

Role

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Force used by this officer against the citizen

• Physical-Other - Was force effective: No

Less Lethal Force used by this officer against the citizen

 CED/Taser-Probe - Was Less Lethal Force Used Effective? No Serial # - X00-567570 Cartridge # -

Was this a projectile/probe contact? Yes

of air cartridges used - 1

Number of cycles through probes - 1

Number of probe hits - 1

Total number of probes deployed - 2

Did the probe(s) penetrate subjects skin? No

Was an additional cartridge deployed? No

Was a follow up drive stun conducted? No

Duration of cycles -

Was this an accidental (unauthorized) discharge? No

Did the application cause injury? No

Was the subject wearing heavy clothing? No

Area of the body where projectiles/probes made contact - No

Was this a direct contact/drive stun contact? Yes

of cycles - 6

Was the cartridge attached? No

Was a follow up drive stun conducted? No

Duration of cycles -

Was this an accidental (unauthorized) discharge? No

Did the application cause injury? - No

Area of body where device applied - Side Torso

Statistical Information

Reason not effective -

Was this an Arc display? No

Was citizen painted with laser / red dot? No

Force Used	Effective?	Regions	Points of contact
Physical-Other	No		
CED/Taser-Probe	No		

Injuries sustained by this officer

Injury	Regions	Injury Locations
COP/Bruising		
COP/Bruising		

Police Officer Daniel Paiz - ABRA Number:

Assignment at time of incident: Title: Police Officer OOO/Patrol/District 6

Video Footage: [No Response]

Role

Force used by this officer against the citizen

· Physical-Other - Was force effective: Yes

Force Used	Effective?	Regions	Points of contact
Physical-Other	Yes		

Police Officer Kevin Spring - ABRA Number:

Assignment at time of incident: Title: Police Officer OSS/PERSONNEL/TRAINING/FIELD TRAING

Video Footage: [No Response]

Role

Force used by this officer against the citizen

· Physical-Other - Was force effective: Yes

Force Used	Effective?	Regions	Points of contact
Physical-Other	Yes		

Police Officer Ismael Villegas - ABRA Number:

Assignment at time of incident: Title: Police Officer OOO/Patrol/District 6

Video Footage: [No Response]

Role

Force used by this officer against the citizen

· Baton/Collapsible Baton - Was force effective: No

Force Used	Effective?	Regions	Points of contact
Baton/Collapsible Baton	No		

Citizen Witnesses

Address	
Phone Role	
Address	
Phone Role	
Address	
Phone Role	
Address	
Phone Role	
Address	
Phone • Role	
Address	
Phone	

Role •	
Address	
Phone Role	
Address	
Phone Role	
Address	
Phone Role	
Officer Witnesses Police Officer Phillip Burnham - ABRA Number:	
Video Footage: [No Response]	
Role	
Police Officer Jason Warren - ABRA Number:	
Video Footage: [No Response]	
Role •	
Reserve Police Offi 09006 Steven Womack - ABRA Num	ber:
Video Footage: [No Response]	
Role •	
Tasks	, , , , , , , , , , , , , , , , , , ,
No tasks to show	
Running Sheet Entries	

No running sheet entries to show

Attachments

Date Attached	Attachment Description	Attachment Type
3/29/2017	CAD CALL	pdf
3/29/2017	Crime report	pdf

Assignment History

Sent Dt	From	То
5/10/2017	Ofcr. Mark Scurria #0526	(None Specified)
Assignment note	s	
Released back to I	APro	
Email sent to rec	eiver	
No email sent		

Chain of Command History

	Routing #1
Sent From:	Police Sergeant Daniel Farnsworth
Sent To:	Reserve Police Offi 09006 Shawn Rogers
CC:	(none)
Sent Date/Time:	3/29/2017 7:10 PM
Instructions from Poli	ce Sergeant Daniel Farnsworth to Reserve Police Offi 09006 Shawn Rogers:
As requested for	event
Comments/Response	from Reserve Police Offi 09006 Shawn Rogers:
Comments: I agree with the summa	ry provided by Sgt. Farnsworth.

	Routing #2
Sent From:	Reserve Police Offi 09006 Shawn Rogers
Sent To:	Police Lieutenant-Exempt Zachary Bales
CC:	(none)
Sent Date/Time:	3/29/2017 10:59 PM
Instructions from Reso Bales:	erve Police Offi 09006 Shawn Rogers to Police Lieutenant-Exempt Zachary
2nd review please and for	rward to Captain Beezley.
Comments/Response	from Police Lieutenant-Exempt Zachary Bales:
Comments: [Forwarded by Police Lie	utenant-Exempt Zachary Bales]

Routing #3		
Sent From:	Police Lieutenant-Exempt Zachary Bales	
Sent To:	Reserve Police Offi 09006 James Beezley	
CC:	(none)	

Instructions from Police Lieutenant-Exempt Zachary Bales to Reserve Police Offi 09006 James Beezley:

3/30/2017 2:46 AM

Sir, For your review. V/r, LT Bales

Comments/Response from Reserve Police Offi 09006 James Beezley:

Comments:

Sent Date/Time:

Use of force within policy. Note that summary has use of CED by Officer's Hight and Dionne. while it was their issued CED's that were deployed, the officers in control at time of deployment were Hight and Villegas.

Additional follow up to discuss training protocols on commscene.	munication on CED deployment between officers on
Assigned Investigator Signature Line	
[Incident pending assignment]	
Chain of Command Signature Lines	
Reserve Police Offi 09006 Shawn Rogers	
Police Lieutenant-Exempt Zachary Bales	
Reserve Police Offi 09006 James Beezley	

CP 2017 - 64178 Reported: Mar-06-2017 13:53:11

Summary Information

Call Number: SA 2017-64178 Date/In Time: Mar-06-2017 13:53:11 Status: CLOSED

Initial Call Type: **DISTURBANCE-CLARIFY** Final Call Type: **DISTURBANCE-CLARIFY**

Priority: 5 Queue Type: R How Received: 911 SYSTEM

Address: 1125 ALHAMBRA BLVD Community: SACRAMENTO

Place Name: in RITE AID

District: 6 Zone: 6D Grid: 0841

Telephone:

Call Taker: 397 FLORES, CHANEL 6067 Call Taker Desk: SD7

Initial Remarks:

MALE W/POSS MENTAL ISSUES IS RUNNING UP TO PEOPLE IN PLOT SAYING HE WANTS TO FIGHT THEM: MH40 NO SHRT, JNS ,HEAVILY TATTOOED

Complainant Name: UNK FEM
*** DO NOT CONTACT ***
Address: 1125 ALHAMBRA BLVD

Home Phone: CELL PHONE Bus Phone: 916 -

Clearance Remarks:

REPORT TO FOLLOW, HERNANDEZ WAS RELEASED PER 849B PC BASED ON THE LONG ESTIMATED TIME OF HOSPITALIZATION

Founded: Yes Report Expected: Yes

How Cleared: POLICE MATTER RESOLVED AT SCENE

BOLO: N Study: NA

Reporting Officer1: 3441 - ALONSO, LILIA 0505

Reporting Officer2:

Cleared By: 3441 ALONSO, LILIA 0505 Clearance Desk/Unit ID: 1A62

Call Times:

Received: Mar-06-2017 13:53:11 Dispatch: Mar-06-2017 14:22:53 En Route: Mar-06-2017 14:23:16 On Scene: Mar-06-2017 14:34:07 Cleared: Mar-07-2017 04:59:46

Total - Units/Services: 44 Remarks: 48 Documents: 6 Entities: 0

Call Relation: **Prime** Related Calls:

CP SA201764237 Follow-up CP SA201764202 Duplicate

Chronological Events

03-06-2017 13:59:10 SD11 241 LOCKWOOD, JILL 6018 Call Remark
-- COMP CALLING BACK -- SUBJ PUT ON A BLK
HOODIE...

03-06-2017 14:21:51 CS3 944 STARK, JENNIFER 6189 Call Update Related Call:ADDED DUPLICATE:SA17-64202

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CP 2017 - 64178

- Reported: Mar-06-2017 13:53:11
- 03-06-2017 14:21:51 CS3 944 STARK, JENNIFER 6189 Call Remark DUPLICATE: SA17-64202: CALLER:, ALHAMBRA BLVD / L ST, (H) , DO NOT CONTACT
- 03-06-2017 14:21:51 CS3 944 STARK, JENNIFER 6189 Call Remark DUPLICATE: SA17-64202: ANOTHER CALLER ABOUT THIS SUBJ ADVISING HE NOW HAS ON A HOODED SWEATSHIRT
- 03-06-2017 14:22:53 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B89 DP 240 DIONNE, CASEY 0395 1125 ALHAMBRA BLVD
- 03-06-2017 14:22:53 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B79 DP 413 HIGHT, MICHAEL 0345 1125 ALHAMBRA BLVD
- 03-06-2017 14:23:16 1B89 240 DIONNE, CASEY 0395 Status Change 1B89 ER 240 DIONNE, CASEY 0395
- 03-06-2017 14:23:26 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B78 ER 1048 VILLEGAS, ISMAEL 0820 1125 ALHAMBRA BLVD
- 03-06-2017 14:23:41 1B89 240 DIONNE, CASEY 0395 Status Change 1B89 IS 240 DIONNE, CASEY 0395
- 03-06-2017 14:23:52 1B79 413 HIGHT, MICHAEL 0345 Status Change 1B79 ER 413 HIGHT, MICHAEL 0345
- 03-06-2017 14:25:38 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B89 ER 240 DIONNE, CASEY 0395 1125 ALHAMBRA BLVD
- 03-06-2017 14:34:07 1B78 1048 VILLEGAS, ISMAEL 0820 Status Change 1B78 OS 1048 VILLEGAS, ISMAEL 0820
- 03-06-2017 14:34:22 1B89 240 DIONNE, CASEY 0395 Status Change 1B89 OS 240 DIONNE, CASEY 0395
- 03-06-2017 14:35:41 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark 1B89 C3 RESONSE
- 03-06-2017 14:35:48 SR9 4145 GARBOUSHIAN, JULIE 6096 Special Service Request (RQ) GEN REQ: RQ,DISP,UNITS REQ C3
- 03-06-2017 14:35:51 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B64 ER 4451 SPRING, KEVIN 1006 1125 ALHAMBRA BLVD
- 03-06-2017 14:35:51 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B64 ER 3683 PAIZ, DANIEL 0270 1125 ALHAMBRA BLVD
- 03-06-2017 14:35:53 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B62 ER 4349 HARRISON, ROBERT 0980 1125 ALHAMBRA BLVD

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CP 2017 - 64178

Reported: Mar-06-2017 13:53:11

- 03-06-2017 14:35:53 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B62 ER 3644 CUNNINGHAM, A. M. 0496 1125 ALHAMBRA BLVD
- 03-06-2017 14:36:01 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark 1889 SUBJ RUNNING SB INTO HOSP
- 03-06-2017 14:36:08 CS1 248 SOUTHWARD, KAMERON 6159 Call Remark **BC'D ON THE HL**
- 03-06-2017 14:36:08 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B65 ER 3728 DONNELL, JUSTIN 0407 1125 ALHAMBRA BLVD
- 03-06-2017 14:36:08 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B65 ER 4234 BORESZ, JEFFREY 0661 1125 ALHAMBRA BLVD
- 03-06-2017 14:36:08 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B67 ER 3212 BOHRER, CYNTHEA 0250 1125 ALHAMBRA BLVD
- 03-06-2017 14:36:28 SR4 4009 KREYDICH, NILA 6060 (Call Remark VOICED ON 4/5
- 03-06-2017 14:36:29 SR11 3508 YONEMURA, JENNIFER 6023 Call Remark PUT OUT ON 1/2
- 03-06-2017 14:36:41 CS1 248 SOUTHWARD, KAMERON 6159 248 SOUTHWARD, KAMERON 6159 CALL FORWARDED:(LN16,FYI)
- 03-06-2017 14:36:47 SR11 3508 YONEMURA, JENNIFER 6023 Status Change 1B25 ER 4375 HENDERSON, CLARE 0978 1125 ALHAMBRA BLVD
- 03-06-2017 14:36:50 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark 1B69/SR9,ER C3
- 03-06-2017 14:36:54 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B69 ER 3727 MEIER, JASON 0432 1125 ALHAMBRA BLVD
- 03-06-2017 14:36:54 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B69 ER 4290 GRITSKEVICH, Y. 0921 1125 ALHAMBRA BLVD
- 03-06-2017 14:36:56 SR11 3508 YONEMURA, JENNIFER 6023 1B25 ER 4375 HENDERSON, CLARE 0978 CONTROL FOR UNIT CHANGED P6

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Reported: Mar-06-2017 13:53:11

- 03-06-2017 14:37:00 CS1 248 SOUTHWARD, KAMERON 6159 Call Remark COVER BC'D ON THE HL
- 03-06-2017 14:37:25 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark 3SM6 COPIED ALL
- 03-06-2017 14:37:51 SR4 4009 KREYDICH, NILA 6060 (TAC40 ER 4283 CECCON, CARLA 0940 (T125 ALHAMBRA BLVD
- 03-06-2017 14:37:51 SR4 4009 KREYDICH, NILA 6060 (TAC40 ER 4280 ARMSTRONG, KENDRA 0963 1125 ALHAMBRA BLVD
- 03-06-2017 14:37:53 K910 990 THOMPSON, AARON 3140 Status Change K910 ER 990 THOMPSON, AARON 3140 ASSIST:1B62 /1125 ALHAMBRA BLVD
- 03-06-2017 14:37:58 SR4 4009 KREYDICH, NILA 6060 (Call Remark TAC40/SR4,ER C3 TO B69
- 03-06-2017 14:38:01 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark 1B62 PULLING UP NOW
- 03-06-2017 14:38:19 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark 1B62 IN PLOT ACROSS FROM THE RITE AID
- 03-06-2017 14:38:34 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark RITE AID 1121 ALHAMBRA********
- 03-06-2017 14:38:38 K93 434 HOVERSTEN, K 0309 (Status Change K93 ER 434 HOVERSTEN, K 0309 (ASSIST:K910 /1125 ALHAMBRA BLVD
- 03-06-2017 14:38:39 CS1 248 SOUTHWARD, KAMERON 6159 Call Remark **CHP UNIT ER**
- 03-06-2017 14:38:49 1B65 4234 BORESZ, JEFFREY 0661 Status Change 1B65 OS 4234 BORESZ, JEFFREY 0661
- 03-06-2017 14:38:49 1B65 4234 BORESZ, JEFFREY 0661 Status Change 1B65 OS 3728 DONNELL, JUSTIN 0407
- 03-06-2017 14:39:16 1B64 3683 PAIZ, DANIEL 0270 Status Change 1B64 OS 3683 PAIZ, DANIEL 0270
- 03-06-2017 14:39:16 1B64 3683 PAIZ, DANIEL 0270 Status Change 1B64 OS 4451 SPRING, KEVIN 1006
- 03-06-2017 14:39:54 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B44 OS 1105 WOMACK, STEVEN 7730

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- 03-06-2017 14:39:54 SR9 4145 GARBOUSHIAN, JULIE 6096 1B44 OS 1105 WOMACK, STEVEN 7730 (Sent to MDT: 1B44, Status changed to OS by SR9
- 03-06-2017 14:40:09 1B67 3212 BOHRER, CYNTHEA 0250 Status Change 1B67 OS 3212 BOHRER, CYNTHEA 0250
- 03-06-2017 14:40:14 SR4 4009 KREYDICH, NILA 6060 (Call Remark 1B44 1201 ALHAMBR****
- 03-06-2017 14:40:20 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark 1B44 MULTIPLE OFFICERS ON SCENE...ADDL
- 03-06-2017 14:40:28 1B43 3446 LEE, JASON S 0732 Status Change 1B43 IS 3446 LEE, JASON S 0732
- 03-06-2017 14:40:35 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark REDUCE & C4 ADDL 906
- 03-06-2017 14:40:37 CS1 248 SOUTHWARD, KAMERON 6159 Call Remark **REDUCE AND C4 BC'D**
- 03-06-2017 14:40:38 SR11 3508 YONEMURA, JENNIFER 6023 Call Remark C4 PUT OUT ON 1/2
- 03-06-2017 14:40:51 SR4 4009 KREYDICH, NILA 6060 () Status Change 1B43 IS 3446 LEE, JASON S 0732
- 03-06-2017 14:40:58 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark 1B44 SUBJ DETAINED*******
- 03-06-2017 14:41:12 K93 434 HOVERSTEN, K 0309 (Status Change K93 IS 434 HOVERSTEN, K 0309 (
- 03-06-2017 14:41:13 SR11 3508 YONEMURA, JENNIFER 6023 Status Change RT16 ER RT8 WOODARD, WAYLA (SSD 462) (1125 ALHAMBRA BLVD
- 03-06-2017 14:41:19 K910 990 THOMPSON, AARON 3140 Status Change K910 IS 990 THOMPSON, AARON 3140
- 03-06-2017 14:41:54 SR11 3508 YONEMURA, JENNIFER 6023 Status Change 1B25 IS 4375 HENDERSON, CLARE 0978 PREEMPT
- 03-06-2017 14:42:43 SR9 4145 GARBOUSHIAN, JULIE 6096 Special Service Request (FA) FIRE/AMB: FA,1B67****WILL NEED FIRE 1201 ALHAMBRA,WEST ENTRANCE CLEAR UNIT:1B67
- 03-06-2017 14:42:48 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 2B31 OS 3801 PANGELINAN, THOMAS 0818 1125 ALHAMBRA BLVD
- 03-06-2017 14:42:48 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change

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2B31 OS 3815 SOUTHWARD, DUSTIN 0690 1125 ALHAMBRA BLVD

- 03-06-2017 14:42:49 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change GRN34 OS 4176 BOWMAN, MICHAEL 0883 1125 ALHAMBRA BLVD
- 03-06-2017 14:43:07 CS1 248 SOUTHWARD, KAMERON 6159 Call Remark FIRE ADV'D VIA HL TO RESPOND TO 1201 ALHAMBRA C3
- 03-06-2017 14:44:43 2B31 3801 PANGELINAN, THOMAS 0818 RMS Query RMS Q PERS-NAME:HERNANDEZ G1:JOHN G2:ANTHONY DOB:02101983 SEX:M STATE:CA REC:Y CAD:N EXTN:Y EXTE:Y EXTM:N EXT1:Y EXTD:Y PKI:N TONC:Y UNIT:2B31
- 03-06-2017 14:44:43 2B31 3801 PANGELINAN, THOMAS 0818 External Query EXT Q PERS-NAME:HERNANDEZ G1:JOHN G2:ANTHONY DOB:02101983 SEX:M STATE:CA REC:Y CAD:N EXTN:Y EXTE:Y EXTM:N EXT1:Y EXTD:Y PKI:N TONC:Y UNIT:2B31

03-06-2017 14:45:00 2B31 Text Document



- 03-06-2017 14:45:55 SR9 4145 GARBOUSHIAN, JULIE 6096 1B44 OS 1105 WOMACK, STEVEN 7730 (1201 ALHAMBRA
- 03-06-2017 14:45:56 SR9 4145 GARBOUSHIAN, JULIE 6096 RT16 OS RT8 WOODARD, WAYLA (SSD 462) (Sent to MDT: RT16, Status changed to OS by SR9
- 03-06-2017 14:45:56 SR9 4145 GARBOUSHIAN, JULIE 6096 1B64 OS 3683 PAIZ, DANIEL 0270 1201 ALHAMBRA
- 03-06-2017 14:45:56 SR9 4145 GARBOUSHIAN, JULIE 6096 1B64 OS 4451 SPRING, KEVIN 1006 1201 ALHAMBRA
- 03-06-2017 14:45:56 SR9 4145 GARBOUSHIAN, JULIE 6096 2B31 OS 3801 PANGELINAN, THOMAS 0818 1201 ALHAMBRA
- 03-06-2017 14:45:56 SR9 4145 GARBOUSHIAN, JULIE 6096 2B31 OS 3815 SOUTHWARD, DUSTIN 0690 1201 ALHAMBRA

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- 03-06-2017 14:45:56 SR9 4145 GARBOUSHIAN, JULIE 6096 1B67 OS 3212 BOHRER, CYNTHEA 0250 1201 ALHAMBRA
- 03-06-2017 14:45:56 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B69 OS 3727 MEIER, JASON 0432 1201 ALHAMBRA
- 03-06-2017 14:45:56 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B69 OS 4290 GRITSKEVICH, Y. 0921 1201 ALHAMBRA
- 03-06-2017 14:45:56 SR9 4145 GARBOUSHIAN, JULIE 6096 1B69 OS 3727 MEIER, JASON 0432 Sent to MDT: 1B69, Status changed to OS by SR9
- 03-06-2017 14:45:56 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change RT16 OS RT8 WOODARD, WAYLA (SSD 462) (1201 ALHAMBRA
- 03-06-2017 14:45:56 SR9 4145 GARBOUSHIAN, JULIE 6096 GRN34 OS 4176 BOWMAN, MICHAEL 0883 1201 ALHAMBRA
- 03-06-2017 14:45:56 SR9 4145 GARBOUSHIAN, JULIE 6096 1B78 OS 1048 VILLEGAS, ISMAEL 0820 1201 ALHAMBRA
- 03-06-2017 14:45:57 SR9 4145 GARBOUSHIAN, JULIE 6096 1B89 OS 240 DIONNE, CASEY 0395 1201 ALHAMBRA
- 03-06-2017 14:45:57 SR9 4145 GARBOUSHIAN, JULIE 6096 1B65 OS 4234 BORESZ, JEFFREY 0661 1201 ALHAMBRA
- 03-06-2017 14:45:57 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B79 OS 413 HIGHT, MICHAEL 0345 1201 ALHAMBRA
- 03-06-2017 14:45:57 SR9 4145 GARBOUSHIAN, JULIE 6096 1B65 OS 3728 DONNELL, JUSTIN 0407 1201 ALHAMBRA
- 03-06-2017 14:45:58 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change TAC40 OS 4280 ARMSTRONG, KENDRA 0963 1201 ALHAMBRA
- 03-06-2017 14:45:58 SR9 4145 GARBOUSHIAN, JULIE 6096 1B79 OS 413 HIGHT, MICHAEL 0345 Sent to MDT: 1B79, Status changed to OS by SR9
- 03-06-2017 14:45:58 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change TAC40 OS 4283 CECCON, CARLA 0940 (1201 ALHAMBRA
- 03-06-2017 14:45:59 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change

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1B62 OS 4349 HARRISON, ROBERT 0980 (1201 ALHAMBRA

03-06-2017 14:45:59 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B62 OS 3644 CUNNINGHAM, A. M. 0496 1201 ALHAMBRA

03-06-2017 14:45:59 SR9 4145 GARBOUSHIAN, JULIE 6096 TAC40 OS 4283 CECCON, CARLA 0940 (

Sent to MDT: TAC40,Status changed to OS by SR9

03-06-2017 14:46:00 2B31 Text Document

Subject: RMS VPROD RMS QUERY PIN: RMS VPROD RMS QUERY PIN:

IDENTIFIED PERSON: HERNANDEZ, JOHN ANTHONY

Score:

DOB: Feb-10-1983 App.

Age: 34

Sex: MALE

Race:

03-06-2017 14:46:00 SR9 4145 GARBOUSHIAN, <u>JU</u>LIE 6096

1B62 OS 4349 HARRISON, ROBERT 0980 (Sent to MDT: 1B62, Status changed to OS by SR9

03-06-2017 14:46:00 2B31 Text Document

Subject: PROB

03-06-2017 14:46:06 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark 1B44 TASER DEPLOYMENT

03-06-2017 14:46:14 TAC40 4283 CECCON, CARLA 0940 (TAC40 IS 4283 CECCON) (TAC40

03-06-2017 14:46:44 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B69 IS 4290 GRITSKEVICH, Y. 0921 PREEMPT

03-06-2017 14:46:44 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B69 IS 3727 MEIER, JASON 0432 PREEMPT

03-06-2017 14:47:23 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change GRN34 IS 4176 BOWMAN, MICHAEL 0883 PREEMPT

03-06-2017 14:49:57 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark 1B44 ENG4/MED6******EXCITED & DELIRIUM STATE

03-06-2017 14:52:36 RT16 RT8 WOODARD, WAYLA (SSD 462) (Other Agency) Status Change

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CP 2017 - 64178 Reported: Mar-06-2017 13:53:11

RT16 IS RT8 WOODARD, WAYLA (SSD 462) (

- 03-06-2017 14:52:59 SR9 4145 GARBOUSHIAN, JULIE 6096 1B64 OS 3683 PAIZ, DANIEL 0270 ADDED STACK TO SA17-64226
- 03-06-2017 14:53:35 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark 1B67 NEED A UNIT TO SECURE PATROL CARS AT RITE AID
- 03-06-2017 14:53:44 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1C34 ER 4438 MACLEAN, THOMAS 1010 1125 ALHAMBRA BLVD
- 03-06-2017 14:53:44 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1C34 ER 3278 BURNHAM, PHILLIP 0416 1125 ALHAMBRA BLVD
- 03-06-2017 14:54:22 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B58 ER 4201 VALADEZ, FABIOLA 0721 1125 ALHAMBRA BLVD
- 03-06-2017 14:55:54 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1C65 ER 3862 MOK, CARLYLE 0615 1201 ALHAMBRA, 1125 ALHAMBRA BLVD
- 03-06-2017 14:56:27 SR4 4009 KREYDICH, NILA 6060 () Status Change 1B58 IS 4201 VALADEZ, FABIOLA 0721
- 03-06-2017 14:56:38 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 3SM6 ER 2392 FARNSWORTH, DANIEL 3002 (1201 ALHAMBRA, 1125 ALHAMBRA BLVD
- 03-06-2017 14:59:59 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Update Related Call:ADDED FOLLOWUP:SA17-64237
- 03-06-2017 15:00:24 CS1 248 SOUTHWARD, KAMERON 6159 Call Remark LN16 COPIED AT TIME OF ADVISAL
- 03-06-2017 15:00:37 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1B34 OS 3799 GRIFFIN, EMILY 0675 1125 ALHAMBRA BLVD
- 03-06-2017 15:01:46 3SM6 2392 FARNSWORTH, DANIEL 3002 (Status Change 3SM6 OS 2392 FARNSWORTH, DANIEL 3002 (
- 03-06-2017 15:01:53 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark 2B31***NOT VOICED...HALF OF VEH WENT TO HOSPITAL W/THE SUSP
- 03-06-2017 15:03:07 1B34 3799 GRIFFIN, EMILY 0675 Call Remark GRIFFIN #675....RESPONDED CODE 3 TO COVER CALL FROM PROPERTY....RECEIVED C4 AND SHUT DOWN AT HIGHWAY 50 AND 15TH ST.....NO INCIDENTS
- 03-06-2017 15:03:21 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1C63 ER 3558 KUHLMANN, JEFF A 0759 1201 ALHAMBRA, 1125 ALHAMBRA BLVD

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- Reported: Mar-06-2017 13:53:11
- 03-06-2017 15:03:21 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1C63 ER 4411 STIGERTS, TRENT 0984 1201 ALHAMBRA, 1125 ALHAMBRA BLVD
- 03-06-2017 15:05:43 SR9 4145 GARBOUSHIAN, JULIE 6096 1C34 ER 4438 MACLEAN, THOMAS 1010 UNAVAILABLE
- 03-06-2017 15:06:48 1C65 3862 MOK, CARLYLE 0615 1C65 OS 3862 MOK, CARLYLE 0615
- 03-06-2017 15:10:55 1C65 3862 MOK, CARLYLE 0615 1C65 ER 3862 MOK, CARLYLE 0615 SUTTER G
- 03-06-2017 15:11:16 2B31 3801 PANGELINAN, THOMAS 0818 2B31 OS 3815 SOUTHWARD, DUSTIN 0690 SUTTER G
- 03-06-2017 15:11:16 2B31 3801 PANGELINAN, THOMAS 0818 2B31 OS 3801 PANGELINAN, THOMAS 0818 SUTTER G
- 03-06-2017 15:11:22 1C34 4438 MACLEAN, THOMAS 1010 1C34 OS 4438 MACLEAN, THOMAS 1010
- 03-06-2017 15:11:22 1C34 4438 MACLEAN, THOMAS 1010 1C34 OS 3278 BURNHAM, PHILLIP 0416
- 03-06-2017 15:11:39 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Remark **2B31/SR9,MEDIC 6 TRANSORTED 1 TO SUTTER G**
- 03-06-2017 15:12:57 1C65 3862 MOK, CARLYLE 0615 1C65 OS 3862 MOK, CARLYLE 0615
- 03-06-2017 15:13:25 SR9 4145 GARBOUSHIAN, JULIE 6096 2B31 OS 3801 PANGELINAN, THOMAS 0818 SUTTER GENERAL
- 03-06-2017 15:13:25 SR9 4145 GARBOUSHIAN, JULIE 6096 2B31 OS 3815 SOUTHWARD, DUSTIN 0690 SUTTER GENERAL
- 03-06-2017 15:15:13 1B34 3799 GRIFFIN, EMILY 0675 Status Change 1B34 IS 3799 GRIFFIN, EMILY 0675
- 03-06-2017 15:18:58 1C63 4411 STIGERTS, TRENT 0984 Status Change 1C63 OS 4411 STIGERTS, TRENT 0984
- 03-06-2017 15:18:58 1C63 4411 STIGERTS, TRENT 0984 Status Change 1C63 OS 3558 KUHLMANN, JEFF A 0759
- 03-06-2017 15:22:11 SR9 4145 GARBOUSHIAN, JULIE 6096 1C63 OS 4411 STIGERTS, TRENT 0984 UNAVAILABLE
- 03-06-2017 15:22:11 SR9 4145 GARBOUSHIAN, JULIE 6096

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CP 2017 - 64178 Reported: Mar-06-2017 13:53:11

1B62 OS 4349 HARRISON, ROBERT 0980 (UNAVAILABLE

- 03-06-2017 15:22:11 SR9 4145 GARBOUSHIAN, JULIE 6096 1B64 OS 3683 PAIZ, DANIEL 0270 UNAVAILABLE
- 03-06-2017 15:22:11 SR9 4145 GARBOUSHIAN, JULIE 6096 1B65 OS 4234 BORESZ, JEFFREY 0661 UNAVAILABLE
- 03-06-2017 15:22:11 SR9 4145 GARBOUSHIAN, JULIE 6096 1C65 OS 3862 MOK, CARLYLE 0615 UNAVAILABLE
- 03-06-2017 15:22:16 SR9 4145 GARBOUSHIAN, JULIE 6096 1B67 OS 3212 BOHRER, CYNTHEA 0250 UNAVAILABLE
- 03-06-2017 15:22:30 SR9 4145 GARBOUSHIAN, JULIE 6096 1B78 OS 1048 VILLEGAS, ISMAEL 0820 UNAVAILABLE
- 03-06-2017 15:22:30 SR9 4145 GARBOUSHIAN, JULIE 6096 1B79 OS 413 HIGHT, MICHAEL 0345 UNAVAILABLE
- 03-06-2017 15:22:30 SR9 4145 GARBOUSHIAN, JULIE 6096 1B89 OS 240 DIONNE, CASEY 0395 UNAVAILABLE
- 03-06-2017 15:28:39 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change LN16 OS 855 ROGERS, SHAWN 7605 (-1201 ALHAMBRA, - 1125 ALHAMBRA BLVD
- 03-06-2017 15:29:00 LN16 855 ROGERS, SHAWN 7605 (LN16 OS 855 ROGERS) (LN16 OS 85
- 03-06-2017 15:29:10 1C65 3862 MOK, CARLYLE 0615 1C65 ER 3862 MOK, CARLYLE 0615 SCENE
- 03-06-2017 15:43:54 SR9 4145 GARBOUSHIAN, JULIE 6096 1C65 OS 3862 MOK, CARLYLE 0615 Sent to MDT: 1C65,Status changed to OS by SR9
- 03-06-2017 15:43:54 SR9 4145 GARBOUSHIAN, JULIE 6096 1C65 OS 3862 MOK, CARLYLE 0615
- 03-06-2017 15:51:12 CS1 248 SOUTHWARD, KAMERON 6159 Status Change PIO3 ER 3536 MCPHAIL, MATTHEW 3144 1201 ALHAMBRA, 1125 ALHAMBRA BLVD
- 03-06-2017 15:52:34 1B44 1105 WOMACK, STEVEN 7730 (Call Remark C3 FROM BROADWAY AND ALHAMBRA TO SCENE.

03-06-2017 15:54:00 1C65 Text Document **Subject: WIT** 978

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CP 2017 - 64178 Reported: Mar-06-2017 13:53:11

03-06-2017 15:54:06 1C65 3862 MOK CARLYLE 0615 RMS O

- 03-06-2017 15:54:06 1C65 3862 MOK, CARLYLE 0615 RMS Query RMS Q PERS-NAME: G1: DOB: SEX:F STATE:CA REC:Y CAD:N EXTN:Y EXTE:Y EXTM:N EXT1:Y EXTD:Y PKI:N TONC:Y UNIT:1C65
- 03-06-2017 15:54:06 1C65 3862 MOK, CARLYLE 0615 External Query EXT Q PERS-NAME: G1: DOB: SEX:F STATE:CA REC:Y CAD:N EXTN:Y EXTE:Y EXTM:N EXT1:Y EXTD:Y PKI:N TONC:Y UNIT:1C65
- 03-06-2017 15:56:22 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change 1C79 ER 1060 WALKER, JAMES 7774 1201 ALHAMBRA, 1125 ALHAMBRA BLVD
- 03-06-2017 16:03:23 1C65 3862 MOK, CARLYLE 0615 RMS Query RMS Q LOC-LOC:1201 ALHAMBRA TYPE:H SVTP:P CAD:Y REC:Y PKI:N
- 03-06-2017 16:04:50 1C79 1060 WALKER, JAMES 7774 Status Change 1C79 OS 1060 WALKER, JAMES 7774
- 03-06-2017 16:08:51 1C63 4411 STIGERTS, TRENT 0984 External Query EXT Q PERS-NAME: G1: DOB: STATE:CA REC:Y CAD:N EXTN:Y EXTE:Y EXTM:N EXT1:Y EXTD:Y PKI:N TONC:Y UNIT:1C63
- 03-06-2017 16:08:51 1C63 4411 STIGERTS, TRENT 0984 RMS Query RMS Q PERS-NAME: G1: DOB: STATE:CA REC:Y CAD:N EXTN:Y EXTE:Y EXTM:N EXT1:Y EXTD:Y PKI:N TONC:Y UNIT:1C63
- 03-06-2017 16:09:23 1C63 4411 STIGERTS, TRENT 0984 RMS Query RMS Q PERS-NAME: G1: DOB: STATE:CA REC:Y CAD:N EXTN:Y EXTE:Y EXIM:N EXT1:Y EXTD:Y PKI:N TONC:Y UNIT:1C63
- 03-06-2017 16:09:23 1C63 4411 STIGERTS, TRENT 0984 External Query EXT Q PERS-NAME: G1: DOB: STATE:CA REC:Y CAD:N EXTN:Y EXTE:Y EXIM:N EXT1:Y EXTD:Y PKI:N TONC:Y UNIT:1C63
- 03-06-2017 16:18:20 CS2 258 EBO, NATASHA 6071 Call Remark
 LIABILITY CLAIMS MANGER NOTIFIED
 VIA LL
- 03-06-2017 16:22:19 CS2 258 EBO, NATASHA 6071 Call Remark CITY ATTY- BRETT WITTER ADVD VIA LL
- 03-06-2017 16:24:42 1C34 4438 MACLEAN, THOMAS 1010 RMS Query RMS Q PERS-NAME:HERNANDEZ G1:JOHN DOB:02101983 SEX:M RACE:H STATE:CA REC:Y CAD:N EXTN:Y

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EXTE:Y EXTM:N EXT1:Y EXTD:Y PKI:N TONC:Y UNIT:1C34

03-06-2017 16:24:42 1C34 4438 MACLEAN, THOMAS 1010 External Query EXT Q PERS-NAME:HERNANDEZ G1:JOHN DOB:02101983 SEX:M RACE:H STATE:CA REC:Y CAD:N EXTN:Y EXTE:Y EXTM:N EXT1:Y EXTD:Y PKI:N TONC:Y UNIT:1C34

03-06-2017 16:25:00 1C34 Text Document



03-06-2017 16:27:00 1C34 Text Document



03-06-2017 16:27:39 CS2 258 EBO, NATASHA 6071 Call Remark
OFFC OF POLICE ACCOUNTABILITY - FRANCINE TOURNOUR
- NOTIFIED VIA LL

03-06-2017 16:28:40 SR11 3155 BADILLA, MELINDA 6033 LN16 OS 855 ROGERS, SHAWN 7605 (CONTROL FOR UNIT CHANGED P6

03-06-2017 16:28:48 CS2 258 EBO, NATASHA 6071 Call Remark PEER SUPPORT WAS NOTIFIED VIA EVERBRIDGE PAGE

03-06-2017 16:31:07 CS1 248 SOUTHWARD, KAMERON 6159 Call Remark HOMI CALL OUT DONE PER LN16 - ONLY WAITING TO HEAR BACK FROM PEER SUPPORT AND SGT WERNER ON WHAT HOMI DETS ARE RESPONDING

03-06-2017 16:34:57 CS1 248 SOUTHWARD, KAMERON 6159 Call Remark **** COMMAND CENTER IN THE P/LOT OF 1201 ALHAMBRA PER LN16

03-06-2017 16:35:02 SR9 3195 HANNUM, JAMIE 6032 Status Change IV140 OS 31 AYERS, SHAWN E 3002 1201 ALHAMBRA, - 1125 ALHAMBRA BLVD

03-06-2017 16:35:02 SR9 3195 HANNUM, JAMIE 6032 Status Change IV143 OS 442 HUNKAPILLER, TRAVIS A 3108 1201 ALHAMBRA, - 1125 ALHAMBRA BLVD

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- Reported: Mar-06-2017 13:53:11
- 03-06-2017 16:35:02 SR9 3195 HANNUM, JAMIE 6032 Status Change IV14 OS 3015 KINNEY, BRIAN 4084 1201 ALHAMBRA, 1125 ALHAMBRA BLVD
- 03-06-2017 16:35:02 SR9 3195 HANNUM, JAMIE 6032 Status Change IV107 OS 522 KRUTZ, SCOT 0680 1201 ALHAMBRA, 1125 ALHAMBRA BLVD
- 03-06-2017 16:35:11 SR9 3195 HANNUM, JAMIE 6032 Status Change IV47 OS 3533 ROBISON, BRADLEY O 3074 1201 ALHAMBRA, 1125 ALHAMBRA BLVD
- 03-06-2017 16:39:02 SR9 3195 HANNUM, JAMIE 6032 2B31 OS 3801 PANGELINAN, THOMAS 0818 UNAVAILABLE
- 03-06-2017 16:44:14 CS1 248 SOUTHWARD, KAMERON 6159 Call Remark PER 2B31/SOUTHWARD SUBJ HAS BEEN MOVED TO ICU BED #4610
- 03-06-2017 16:45:24 1C79 1060 WALKER, JAMES 7774 Call Remark **JOHN ANTHONY HERNANDEZ X**-
- 03-06-2017 16:45:27 1B67 3212 BOHRER, CYNTHEA 0250 RMS Query RMS Q LOC-LOC:1201 ALHAMBRA TYPE:H SVTP:P CAD:Y REC:Y PKI:N
- 03-06-2017 16:47:15 SR9 3195 HANNUM, JAMIE 6032 1C79 OS 1060 WALKER, JAMES 7774 UNAVAILABLE
- 03-06-2017 16:54:47 CS1 248 SOUTHWARD, KAMERON 6159 Call Remark PEER SUPPORT NOTIFIED
- 03-06-2017 17:01:15 CS1 248 SOUTHWARD, KAMERON 6159 Call Remark **LAW ENF CHAPLAINS ADV'D PER 3SM6**
- 03-06-2017 17:03:27 CS1 248 SOUTHWARD, KAMERON 6159 Call Remark MANAGEMENT PAGE SENT AT 1616
- 03-06-2017 17:06:50 CS1 248 SOUTHWARD, KAMERON 6159 Status Change STF18 OS 3141 BRYAN, DARRALD 3080 (1125 ALHAMBRA BLVD)
- 03-06-2017 17:06:50 CS1 248 SOUTHWARD, KAMERON 6159 Status Change STF20 OS 709 NAFF, JEFFREY 3089 1125 ALHAMBRA BLVD
- 03-06-2017 17:16:49 1B67 3212 BOHRER, CYNTHEA 0250 RMS Query RMS Q PERS-NAME:HERNANDEZ G1:JOHN DOB:02101983 SEX:M STATE:CA REC:Y CAD:N EXTN:N EXTE:N EXTM:N EXT1:N EXTD:N PKI:N
- 03-06-2017 17:30:59 SR9 3195 HANNUM, JAMIE 6032 Status Change IV8 OS 166 CHAN, RUDOLPH 5001 1201 ALHAMBRA, 1125 ALHAMBRA BLVD

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- 03-06-2017 18:03:57 1B67 3212 BOHRER, CYNTHEA 0250 RMS Query RMS Q LOC-LOC: TYPE:H MUN:1 SVTP:P CAD:Y REC:Y PKI:N
- 03-06-2017 18:04:37 1B67 3212 BOHRER, CYNTHEA 0250 RMS Query RMS Q RPT-TYPE:GO RYR:2014 RNM:180671 OPJUR:SA PKI:N
- 03-06-2017 18:20:29 SR12 4259 JACKSON, ALEXIS N R061 1B64 OS 3683 PAIZ, DANIEL 0270 DELETED STACK TO SA17-64226
- 03-06-2017 18:32:00 1C34 4438 MACLEAN, THOMAS 1010 1C34 ER 4438 MACLEAN, THOMAS 1010 SUTTER GENERAL
- 03-06-2017 18:32:00 1C34 4438 MACLEAN, THOMAS 1010 1C34 ER 3278 BURNHAM, PHILLIP 0416 SUTTER GENERAL
- 03-06-2017 18:39:07 SR9 3195 HANNUM, JAMIE 6032 Status Change PIO3 OS 3536 MCPHAIL, MATTHEW 3144
- 03-06-2017 18:42:08 1B65 4234 BORESZ, JEFFREY 0661 Status Change 1B65 ER 4234 BORESZ, JEFFREY 0661 3OOR
- 03-06-2017 18:42:08 1B65 4234 BORESZ, JEFFREY 0661 Status Change 1B65 ER 3728 DONNELL, JUSTIN 0407 3OOR
- 03-06-2017 18:56:08 1B65 4234 BORESZ, JEFFREY 0661 Status Change 1B65 IS 4234 BORESZ, JEFFREY 0661
- 03-06-2017 18:56:08 1B65 4234 BORESZ, JEFFREY 0661 Status Change 1B65 IS 3728 DONNELL, JUSTIN 0407
- 03-06-2017 18:57:52 1B44 1105 WOMACK, STEVEN 7730 (1B44 OS 1105 WOMACK, STEVEN 7730 (JERPF
- 03-06-2017 19:02:06 1C79 1060 WALKER, JAMES 7774 1C79 OS 1060 WALKER, JAMES 7774 300R
- 03-06-2017 19:06:33 LN16 855 ROGERS, SHAWN 7605 (LN16 IS 855 ROGERS) (LN16 IS 855 ROGERS, SHAWN 7605 (LN16 IS 855 ROGERS) (LN16 IS 855 ROGERS)
- 03-06-2017 19:23:04 1C79 1060 WALKER, JAMES 7774 Status Change 1C79 IS 1060 WALKER, JAMES 7774
- 03-06-2017 19:27:59 1B67 3212 BOHRER, CYNTHEA 0250 Status Change 1B67 IS 3212 BOHRER, CYNTHEA 0250
- 03-06-2017 19:29:23 2B31 3801 PANGELINAN, THOMAS 0818 Status Change

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2B31 IS 3801 PANGELINAN, THOMAS 0818

- 03-06-2017 19:29:23 2B31 3801 PANGELINAN, THOMAS 0818 Status Change 2B31 IS 3815 SOUTHWARD, DUSTIN 0690
- 03-06-2017 19:32:25 SR9 3195 HANNUM, JAMIE 6032 Status Change 1C89 ER 3778 CASILLAS, ROY 0719 (1201 ALHAMBRA, - 1125 ALHAMBRA BLVD)
- 03-06-2017 19:33:38 SR9 3195 HANNUM, JAMIE 6032 1C34 OS 4438 MACLEAN, THOMAS 1010
- 03-06-2017 19:33:38 SR9 3195 HANNUM, JAMIE 6032 1C34 OS 3278 BURNHAM, PHILLIP 0416
- 03-06-2017 19:33:39 SR9 3195 HANNUM, JAMIE 6032 1C34 OS 4438 MACLEAN, THOMAS 1010 Sent to MDT: 1C34,Status changed to OS by SR9
- 03-06-2017 19:42:48 SR9 3195 HANNUM, JAMIE 6032 1C65 OS 3862 MOK, CARLYLE 0615 1201 ALHAMBRA
- 03-06-2017 19:47:19 1C65 3862 MOK, CARLYLE 0615 Status Change 1C65 ER 3862 MOK, CARLYLE 0615 300
- 03-06-2017 19:56:26 1C65 3862 MOK, CARLYLE 0615 Status Change 1C65 OS 3862 MOK, CARLYLE 0615
- 03-06-2017 20:03:26 SR9 3195 HANNUM, JAMIE 6032 1C89 ER 3778 CASILLAS, ROY 0719 (UNAVAILABLE
- 03-06-2017 20:03:36 SR9 3195 HANNUM, JAMIE 6032 Status Change 1C89 OS 3778 CASILLAS, ROY 0719
- 03-06-2017 20:03:37 SR9 3195 HANNUM, JAMIE 6032 1C89 OS 3778 CASILLAS, ROY 0719 (Sent to MDT: 1C89, Status changed to OS by SR9
- 03-06-2017 20:16:32 1B44 1105 WOMACK, STEVEN 7730 () Call Remark SUPP REPORT PER SGT. WERNER.
- 03-06-2017 20:22:40 3SM6 2392 FARNSWORTH, DANIEL 3002 (Status Change 3SM6 IS 2392 FARNSWORTH, DANIEL 3002 (
- 03-06-2017 20:50:54 1C89 3778 CASILLAS, ROY 0719 () Status Change 1C89 IS 3778 CASILLAS, ROY 0719 (
- 03-06-2017 20:52:51 1C63 4411 STIGERTS, TRENT 0984 Status Change 1C63 IS 4411 STIGERTS, TRENT 0984
- 03-06-2017 20:52:51 1C63 4411 STIGERTS, TRENT 0984 Status Change 1C63 IS 3558 KUHLMANN, JEFF A 0759

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CP 2017 - 64178

Reported: Mar-06-2017 13:53:11

- 03-06-2017 20:53:51 SR9 3195 HANNUM, JAMIE 6032 Status Change IV176 OS 3569 MACAULAY, EDWARD 3072 1201 ALHAMBRA, 1125 ALHAMBRA BLVD
- 03-06-2017 20:53:57 SR9 3195 HANNUM, JAMIE 6032 IV176 OS 3569 MACAULAY, EDWARD 3072 HOJ
- 03-06-2017 20:56:52 SR9 3195 HANNUM, JAMIE 6032 Status Change 1B79 IS 413 HIGHT, MICHAEL 0345
- 03-06-2017 20:58:32 1B78 1048 VILLEGAS, ISMAEL 0820 Status Change 1B78 IS 1048 VILLEGAS, ISMAEL 0820
- 03-06-2017 20:59:31 1B89 240 DIONNE, CASEY 0395 Status Change 1B89 IS 240 DIONNE, CASEY 0395
- 03-06-2017 21:01:28 SR9 3195 HANNUM, JAMIE 6032 Status Change PIO3 IS 3536 MCPHAIL, MATTHEW 3144
- 03-06-2017 21:01:28 SR9 3195 HANNUM, JAMIE 6032 Status Change STF18 IS 3141 BRYAN, DARRALD 3080
- 03-06-2017 21:01:28 SR9 3195 HANNUM, JAMIE 6032 Status Change STF20 IS 709 NAFF, JEFFREY 3089
- 03-06-2017 21:03:37 SR9 3195 HANNUM, JAMIE 6032 1B62 OS 4349 HARRISON, ROBERT 0980 (300 RICHARDS
- 03-06-2017 21:03:37 SR9 3195 HANNUM, JAMIE 6032 1B62 OS 3644 CUNNINGHAM, A. M. 0496 300 RICHARDS
- 03-06-2017 21:03:41 SR9 3195 HANNUM, JAMIE 6032 1B64 OS 3683 PAIZ, DANIEL 0270 300 RICHARDS
- 03-06-2017 21:03:41 SR9 3195 HANNUM, JAMIE 6032 1B64 OS 4451 SPRING, KEVIN 1006 300 RICHARDS
- 03-06-2017 21:04:37 1B64 3683 PAIZ, DANIEL 0270 Status Change 1B64 IS 3683 PAIZ, DANIEL 0270
- 03-06-2017 21:04:37 1B64 3683 PAIZ, DANIEL 0270 Status Change 1B64 IS 4451 SPRING, KEVIN 1006
- 03-06-2017 21:18:57 SR9 3195 HANNUM, JAMIE 6032 Status Change 1B62 IS 4349 HARRISON, ROBERT 0980
- 03-06-2017 21:18:57 SR9 3195 HANNUM, JAMIE 6032 Status Change 1B62 IS 3644 CUNNINGHAM, A. M. 0496
- 03-06-2017 21:19:26 SR9 3195 HANNUM, JAMIE 6032 IV107 OS 522 KRUTZ, SCOT 0680 HOJ

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CP 2017 - 64178

- Reported: Mar-06-2017 13:53:11
- 03-06-2017 21:19:31 SR9 3195 HANNUM, JAMIE 6032 IV14 OS 3015 KINNEY, BRIAN 4084 HOJ
- 03-06-2017 21:19:37 SR9 3195 HANNUM, JAMIE 6032 IV140 OS 31 AYERS, SHAWN E 3002 HOJ
- 03-06-2017 21:19:40 SR9 3195 HANNUM, JAMIE 6032 IV143 OS 442 HUNKAPILLER, TRAVIS A 3108 HOJ
- 03-06-2017 21:19:48 SR9 3195 HANNUM, JAMIE 6032 IV47 OS 3533 ROBISON, BRADLEY O 3074 HOJ
- 03-06-2017 21:19:57 SR9 3195 HANNUM, JAMIE 6032 IV8 OS 166 CHAN, RUDOLPH 5001 HOJ
- 03-06-2017 21:20:05 SR9 3195 HANNUM, JAMIE 6032 Status Change IV21 OS 1076 WERNER, BRADLEY D 7725 HOJ, 1125 ALHAMBRA BLVD
- 03-06-2017 21:45:29 1C65 3862 MOK, CARLYLE 0615 Status Change 1C65 IS 3862 MOK, CARLYLE 0615
- 03-06-2017 22:03:42 SR9 3155 BADILLA, MELINDA 6033 Status Change 1C68 DP 3126 SLAY, AMY 0587 SUTTER GENERAL, 1125 ALHAMBRA BLVD
- 03-06-2017 22:03:50 SR9 3155 BADILLA, MELINDA 6033 1C68 DP 3126 SLAY, AMY 0587 CONTROL FOR UNIT CHANGED P3
- 03-06-2017 22:05:09 1C68 3126 SLAY, AMY 0587 Status Change 1C68 ER 3126 SLAY, AMY 0587
- 03-06-2017 22:10:32 SR9 3155 BADILLA, MELINDA 6033 1C68 ER 3126 SLAY, AMY 0587 4610-2801 L ST (V)
- 03-06-2017 22:10:32 SR9 3155 BADILLA, MELINDA 6033 1C34 ER 4438 MACLEAN, THOMAS 1010 Sent to MDT: 1C34, Status changed to ER by SR9
- 03-06-2017 22:10:32 SR9 3155 BADILLA, MELINDA 6033 Status Change 1C34 ER 3278 BURNHAM, PHILLIP 0416 4610-2801 L ST (V)
- 03-06-2017 22:10:32 SR9 3155 BADILLA, MELINDA 6033 Status Change 1C34 ER 4438 MACLEAN, THOMAS 1010 4610-2801 L ST (V)
- 03-06-2017 22:10:37 SR9 3155 BADILLA, MELINDA 6033 Status Change 1C34 OS 4438 MACLEAN, THOMAS 1010
- 03-06-2017 22:10:37 SR9 3155 BADILLA, MELINDA 6033 Status Change 1C34 OS 3278 BURNHAM, PHILLIP 0416
- 03-06-2017 22:10:38 SR9 3155 BADILLA, MELINDA 6033 1C34 OS 4438 MACLEAN, THOMAS 1010 Sent to

For: 149 Tuesday March 16, 2021

CP 2017 - 64178 Reported: Mar-06-2017 13:53:11

- MDT: 1C34, Status changed to OS by SR9
- 03-06-2017 22:13:02 SR9 3155 BADILLA, MELINDA 6033 IV107 OS 522 KRUTZ, SCOT 0680 UNAVAILABLE
- 03-06-2017 22:13:16 SR9 3155 BADILLA, MELINDA 6033 1C68 ER 3126 SLAY, AMY 0587 UNAVAILABLE
- 03-06-2017 22:18:30 1C68 3126 SLAY, AMY 0587 Status Change 1C68 OS 3126 SLAY, AMY 0587
- 03-06-2017 22:44:55 1C34 4438 MACLEAN, THOMAS 1010 Status Change 1C34 IS 4438 MACLEAN, THOMAS 1010
- 03-06-2017 22:44:55 1C34 4438 MACLEAN, THOMAS 1010 Status Change 1C34 IS 3278 BURNHAM, PHILLIP 0416
- 03-06-2017 23:28:33 SR9 3155 BADILLA, MELINDA 6033 IV14 OS 3015 KINNEY, BRIAN 4084 UNAVAILABLE
- 03-06-2017 23:31:49 SR9 3155 BADILLA, MELINDA 6033 IV143 OS 442 HUNKAPILLER, TRAVIS A 3108 UNAVAILABLE
- 03-06-2017 23:31:49 SR9 3155 BADILLA, MELINDA 6033 IV140 OS 31 AYERS, SHAWN E 3002 UNAVAILABLE
- 03-06-2017 23:31:49 SR9 3155 BADILLA, MELINDA 6033 IV176 OS 3569 MACAULAY, EDWARD 3072 UNAVAILABLE
- 03-06-2017 23:31:49 SR9 3155 BADILLA, MELINDA 6033 IV47 OS 3533 ROBISON, BRADLEY O 3074 UNAVAILABLE
- 03-06-2017 23:31:49 SR9 3155 BADILLA, MELINDA 6033 IV21 OS 1076 WERNER, BRADLEY D 7725 UNAVAILABLE
- 03-06-2017 23:31:54 SR9 3155 BADILLA, MELINDA 6033 IV8 OS 166 CHAN, RUDOLPH 5001 UNAVAILABLE
- 03-06-2017 23:55:58 SD5 3195 HANNUM, JAMIE 6032 Call Remark JUST CALLED INTO DET AND THEY ARE STILL AT HOJ
- 03-07-2017 00:25:16 SR9 3155 BADILLA, MELINDA 6033 Status Change 1A79 DP 3359 LEONARD, KENNETH 0877 4610-2801 L ST, - 1125 ALHAMBRA BLVD
- 03-07-2017 00:25:26 SR9 3155 BADILLA, MELINDA 6033 1A79 DP 3359 LEONARD, KENNETH 0877 UNAVAILABLE
- 03-07-2017 00:25:46 1A79 3359 LEONARD, KENNETH 0877 Status Change 1A79 ER 3359 LEONARD, KENNETH 0877

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CP 2017 - 64178

Reported: Mar-06-2017 13:53:11

- 03-07-2017 00:35:49 1A79 3359 LEONARD, KENNETH 0877 Status Change 1A79 OS 3359 LEONARD, KENNETH 0877
- 03-07-2017 01:05:13 SR9 3155 BADILLA, MELINDA 6033 Status Change IV14 IS 3015 KINNEY, BRIAN 4084
- 03-07-2017 01:06:41 SR9 3155 BADILLA, MELINDA 6033 Status Change IV140 IS 31 AYERS, SHAWN E 3002
- 03-07-2017 01:06:41 SR9 3155 BADILLA, MELINDA 6033 Status Change IV176 IS 3569 MACAULAY, EDWARD 3072
- 03-07-2017 01:06:41 SR9 3155 BADILLA, MELINDA 6033 Status Change IV107 IS 522 KRUTZ, SCOT 0680
- 03-07-2017 01:07:07 SR9 3155 BADILLA, MELINDA 6033 Status Change IV143 IS 442 HUNKAPILLER, TRAVIS A 3108
- 03-07-2017 01:07:07 SR9 3155 BADILLA, MELINDA 6033 Status Change IV21 IS 1076 WERNER, BRADLEY D 7725
- 03-07-2017 01:07:08 SR9 3155 BADILLA, MELINDA 6033 Status Change IV47 IS 3533 ROBISON, BRADLEY O 3074
- 03-07-2017 01:07:08 SR9 3155 BADILLA, MELINDA 6033 Status Change IV8 IS 166 CHAN, RUDOLPH 5001
- 03-07-2017 01:33:39 SR9 3155 BADILLA, MELINDA 6033 Status Change 1C68 IS 3126 SLAY, AMY 0587
- 03-07-2017 03:50:38 SR4 731 NUETZMAN, PAMELA K R003 Status Change 1A62 ER 3441 ALONSO, LILIA 0505 4610-2801 L ST, - 1125 ALHAMBRA BLVD
- 03-07-2017 03:57:31 1A62 3441 ALONSO, LILIA 0505 Status Change 1A62 OS 3441 ALONSO, LILIA 0505
- 03-07-2017 04:51:00 1A79 3359 LEONARD, KENNETH 0877 Status Change 1A79 IS 3359 LEONARD, KENNETH 0877
- 03-07-2017 04:57:43 1A62 3441 ALONSO, LILIA 0505 Call Remark ASSISTED A79 WITH 849B PROCESS, WAITED FOR SECURITY TO RETRIEVE BLUE HANDCUFFS AND LEG SHACKLES. LEFT A COPY OF THE 849B FORM WITH HERNANDEZ' NURSE TO BE ADDED TO HIS PERSONAL PROPERTY.
- 03-07-2017 04:59:46 1A62 3441 ALONSO, LILIA 0505 Status Change 1A62 IS 3441 ALONSO, LILIA 0505
- 03-07-2017 04:59:46 1A62 3441 ALONSO, LILIA 0505 Call Update **Prime Unit changed:PRIME FOR SA17-64178 TO 1A62**
- 03-07-2017 04:59:46 1A62 3441 ALONSO, LILIA 0505 Call Cleared 1A62 IS 3441 ALONSO, LILIA 0505 CLEARED CASE SA64178 FOUNDED-Y REPORT-Y CLEARED BY-A FINAL-415 BOLO-N STUDY FLAG-NA REM-REPORT TO

For: 149 Tuesday March 16, 2021

CP 2017 - 64178 Reported: Mar-06-2017 13:53:11

FOLLOW, HERNANDEZ WAS RELEASED PER 849B PC BASED ON THE LONG ESTIMATED TIME OF HOSPITALIZATION

03-30-2017 20:<u>19:54 SD2 319 GARCIA, RANEE 6044 Call Remark</u>

CALLER

UNK PHN — WORKS AT 1201 ALHAMBRA BL ...ADV THEY WITN THE WHOLE INCIDENT

Dispatch Information

Prime Unit: 1A62 Type:PT 3441 ALONSO, LILIA 0505

Dispatched: Mar-07-2017 03:50:38 En Route: Mar-07-2017 03:50:38 On Scene: Mar-07-2017 03:57:31 In Service: Mar-07-2017 04:59:46

Backup Unit: 1A79 Type:PT 3359 LEONARD, KENNETH 0877

Dispatched: Mar-07-2017 00:25:16 En Route: Mar-07-2017 00:25:46 On Scene: Mar-07-2017 00:35:49 In Service: Mar-07-2017 04:51:00

Backup Unit: 1B25 Type:PT 4375 HENDERSON, CLARE 0978

Dispatched: Mar-06-2017 14:36:47 En Route: Mar-06-2017 14:36:47 In Service: Mar-06-2017 14:41:54

Backup Unit: 1B34 Type:PT 3799 GRIFFIN, EMILY 0675

Dispatched: Mar-06-2017 15:00:37 En Route: Mar-06-2017 15:00:37 On Scene: Mar-06-2017 15:00:37 In Service: Mar-06-2017 15:15:13

Backup Unit: 1B43 Type:PT 3446 LEE, JASON S 0732

Dispatched: Mar-06-2017 14:39:15 En Route: Mar-06-2017 14:39:15 In Service: Mar-06-2017 14:40:28

Backup Unit: 1B43 Type:PT 3446 LEE, JASON S 0732

Dispatched: Mar-06-2017 14:40:43 En Route: Mar-06-2017 14:40:43 In Service: Mar-06-2017 14:40:51

Backup Unit: 1B44 Type:PT 1105 WOMACK, STEVEN 7730

Dispatched: Mar-06-2017 14:36:41 En Route: Mar-06-2017 14:36:41 On Scene: Mar-06-2017 14:39:54 In Service: Mar-06-2017 20:16:38

Backup Unit: 1B58 Type:PT 4201 VALADEZ, FABIOLA 0721

Dispatched: Mar-06-2017 14:54:22 En Route: Mar-06-2017 14:54:22 In Service: Mar-06-2017 14:56:27

Backup Unit: 1B62 Type:PT 4349 HARRISON, ROBERT 0980

Dispatched: Mar-06-2017 14:35:53

) 3644 CUNNINGHAM, A. M.

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CP 2017 - 64178 Reported: Mar-06-2017 13:53:11

En Route: Mar-06-2017 14:35:53 On Scene: Mar-06-2017 14:45:59 In Service: Mar-06-2017 21:18:57

Backup Unit: 1B64 Type:PL 3683 PAIZ, DANIEL 0270 4451 SPRING, KEVIN 1006

Dispatched: Mar-06-2017 14:35:51 En Route: Mar-06-2017 14:35:51 On Scene: Mar-06-2017 14:39:16 In Service: Mar-06-2017 21:04:37

Backup Unit: 1B65 Type:PT 4234 BORESZ, JEFFREY 0661 3728 DONNELL, JUSTIN 0407

Dispatched: Mar-06-2017 14:36:08 En Route: Mar-06-2017 18:42:08 On Scene: Mar-06-2017 14:38:49 In Service: Mar-06-2017 18:56:08

Backup Unit: 1B67 Type:PT 3212 BOHRER, CYNTHEA 0250

Dispatched: Mar-06-2017 14:36:08 En Route: Mar-06-2017 14:36:08 On Scene: Mar-06-2017 14:40:09 In Service: Mar-06-2017 19:27:59

Backup Unit: 1B69 Type:PT 3727 MEIER, JASON 0432 4290 GRITSKEVICH, Y. 0921

Dispatched: Mar-06-2017 14:36:54 En Route: Mar-06-2017 14:36:54 On Scene: Mar-06-2017 14:45:56 In Service: Mar-06-2017 14:46:44

Backup Unit: 1B78 Type:PT 1048 VILLEGAS, ISMAEL 0820

Dispatched: Mar-06-2017 14:23:26 En Route: Mar-06-2017 14:23:26 On Scene: Mar-06-2017 14:34:07 In Service: Mar-06-2017 20:58:32

Backup Unit: 1B79 Type:PT 413 HIGHT, MICHAEL 0345

Dispatched: Mar-06-2017 14:22:53 En Route: Mar-06-2017 14:23:52 On Scene: Mar-06-2017 14:45:57 In Service: Mar-06-2017 20:56:52

Backup Unit: 1B89 Type:PT 240 DIONNE, CASEY 0395

Dispatched: Mar-06-2017 14:22:53 En Route: Mar-06-2017 14:23:16 In Service: Mar-06-2017 14:23:41

Backup Unit: 1B89 Type:PT 240 DIONNE, CASEY 0395

Dispatched: Mar-06-2017 14:25:38 En Route: Mar-06-2017 14:25:38 On Scene: Mar-06-2017 14:34:22 In Service: Mar-06-2017 20:59:31

Backup Unit: 1C34 Type:PT 4438 MACLEAN, THOMAS 1010 3278 BURNHAM, PHILLIP 0416

Dispatched: Mar-06-2017 14:53:44 En Route: Mar-06-2017 22:10:32 On Scene: Mar-06-2017 22:10:37 In Service: Mar-06-2017 22:44:55

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CP 2017 - 64178 Reported: Mar-06-2017 13:53:11

Backup Unit: 1C63 Type:PT 4411 STIGERTS, TRENT 0984 3558 KUHLMANN, JEFF A 0759

Dispatched: Mar-06-2017 15:03:21 En Route: Mar-06-2017 15:03:21 On Scene: Mar-06-2017 15:18:58 In Service: Mar-06-2017 20:52:51

Backup Unit: 1C65 Type:PT 3862 MOK, CARLYLE 0615

Dispatched: Mar-06-2017 14:55:54 En Route: Mar-06-2017 19:47:19 On Scene: Mar-06-2017 19:56:26 In Service: Mar-06-2017 21:45:29

Backup Unit: 1C68 Type:PT 3126 SLAY, AMY 0587

Dispatched: Mar-06-2017 22:03:42 En Route: Mar-06-2017 22:05:09 On Scene: Mar-06-2017 22:18:30 In Service: Mar-07-2017 01:33:39

Backup Unit: 1C79 Type:PT 1060 WALKER, JAMES 7774

Dispatched: Mar-06-2017 15:56:22 En Route: Mar-06-2017 15:56:22 On Scene: Mar-06-2017 16:04:50 In Service: Mar-06-2017 19:23:04

Backup Unit: 1C89 Type:PT 3778 CASILLAS, ROY 0719 (

Dispatched: Mar-06-2017 19:32:25 En Route: Mar-06-2017 19:32:25 On Scene: Mar-06-2017 20:03:36 In Service: Mar-06-2017 20:50:54

Backup Unit: 2B31 Type:PT 3801 PANGELINAN, THOMAS 0818 3815 SOUTHWARD, DUSTIN 0690

Dispatched: Mar-06-2017 14:42:48 En Route: Mar-06-2017 14:42:48 On Scene: Mar-06-2017 14:42:48 In Service: Mar-06-2017 19:29:23

Backup Unit: 3SM6 Type:PS 2392 FARNSWORTH, DANIEL 3002

Dispatched: Mar-06-2017 14:56:38 En Route: Mar-06-2017 14:56:38 On Scene: Mar-06-2017 15:01:46 In Service: Mar-06-2017 20:22:40

Backup Unit: GRN34 Type:GR 4176 BOWMAN, MICHAEL 0883

Dispatched: Mar-06-2017 14:42:49 En Route: Mar-06-2017 14:42:49 On Scene: Mar-06-2017 14:42:49 In Service: Mar-06-2017 14:47:23

Backup Unit: IV107 Type:DT 522 KRUTZ, SCOT 0680

Dispatched: Mar-06-2017 16:35:02 En Route: Mar-06-2017 16:35:02 On Scene: Mar-06-2017 16:35:02 In Service: Mar-07-2017 01:06:41

Backup Unit: IV14 Type:DT 3015 KINNEY, BRIAN 4084

Dispatched: Mar-06-2017 16:35:02 En Route: Mar-06-2017 16:35:02

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CP 2017 - 64178 Reported: Mar-06-2017 13:53:11

On Scene: Mar-06-2017 16:35:02 In Service: Mar-07-2017 01:05:13

Backup Unit: IV140 Type:DT 31 AYERS, SHAWN E 3002

Dispatched: Mar-06-2017 16:35:02 En Route: Mar-06-2017 16:35:02 On Scene: Mar-06-2017 16:35:02 In Service: Mar-07-2017 01:06:41

Backup Unit: IV143 Type:DT 442 HUNKAPILLER, TRAVIS A 3108

Dispatched: Mar-06-2017 16:35:02 En Route: Mar-06-2017 16:35:02 On Scene: Mar-06-2017 16:35:02 In Service: Mar-07-2017 01:07:07

Backup Unit: IV176 Type:DT 3569 MACAULAY, EDWARD 3072

Dispatched: Mar-06-2017 20:53:51 En Route: Mar-06-2017 20:53:51 On Scene: Mar-06-2017 20:53:51 In Service: Mar-07-2017 01:06:41

Backup Unit: IV21 Type:DT 1076 WERNER, BRADLEY D 7725

Dispatched: Mar-06-2017 21:20:05 En Route: Mar-06-2017 21:20:05 On Scene: Mar-06-2017 21:20:05 In Service: Mar-07-2017 01:07:07

Backup Unit: IV47 Type:DT 3533 ROBISON, BRADLEY O 3074

Dispatched: Mar-06-2017 16:35:11 En Route: Mar-06-2017 16:35:11 On Scene: Mar-06-2017 16:35:11 In Service: Mar-07-2017 01:07:08

Backup Unit: IV8 Type:PS 166 CHAN, RUDOLPH 5001

Dispatched: Mar-06-2017 17:30:59 En Route: Mar-06-2017 17:30:59 On Scene: Mar-06-2017 17:30:59 In Service: Mar-07-2017 01:07:08

Backup Unit: K910 Type:K9 990 THOMPSON, AARON 3140

Dispatched: Mar-06-2017 14:37:53 En Route: Mar-06-2017 14:37:53 In Service: Mar-06-2017 14:41:19

Backup Unit: K93 Type:K9 434 HOVERSTEN, K 0309

Dispatched: Mar-06-2017 14:38:38 En Route: Mar-06-2017 14:38:38 In Service: Mar-06-2017 14:41:12

Backup Unit: LN16 Type:PS 855 ROGERS, SHAWN 7605

Dispatched: Mar-06-2017 15:28:39 En Route: Mar-06-2017 15:28:39 On Scene: Mar-06-2017 15:28:39 In Service: Mar-06-2017 19:06:33

Backup Unit: PIO3 Type:SD 3536 MCPHAIL, MATTHEW 3144

Dispatched: Mar-06-2017 15:51:12

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CP 2017 - 64178 Reported: Mar-06-2017 13:53:11

En Route: Mar-06-2017 15:51:12 On Scene: Mar-06-2017 18:39:07 In Service: Mar-06-2017 21:01:28

Backup Unit: RT16 Type:RT RT8 WOODARD, WAYLA (SSD 462) (Other Agency)

Dispatched: Mar-06-2017 14:41:13 En Route: Mar-06-2017 14:41:13 On Scene: Mar-06-2017 14:45:56 In Service: Mar-06-2017 14:52:36

Backup Unit: STF18 Type:DT 3141 BRYAN, DARRALD 3080

Dispatched: Mar-06-2017 17:06:50 En Route: Mar-06-2017 17:06:50 On Scene: Mar-06-2017 17:06:50 In Service: Mar-06-2017 21:01:28

Backup Unit: STF20 Type:DT 709 NAFF, JEFFREY 3089

Dispatched: Mar-06-2017 17:06:50 En Route: Mar-06-2017 17:06:50 On Scene: Mar-06-2017 17:06:50 In Service: Mar-06-2017 21:01:28

Backup Unit: TAC40 Type:SD 4283 CECCON, CARLA 0940 () 4280 ARMSTRONG, KENDRA

Dispatched: Mar-06-2017 14:37:51 En Route: Mar-06-2017 14:37:51 On Scene: Mar-06-2017 14:45:58 In Service: Mar-06-2017 14:46:14

Unit: Type:

Unit: Type:

Special Service Information

At: Mar-06-2017 00:00:00 SR9 4145

Last Updated: 03-06-2017 14:35:48

:00 SR9 4145 Last Updated: 03-06-2017 14:42:43

** END OF HARDCOPY **

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CP 2017 - 64202 Reported: Mar-06-2017 14:20:56

Summary Information

Call Number: SA 2017-64202 Date/In Time: Mar-06-2017 14:20:56 Status: CLOSED

Initial Call Type: **DISTURBANCE-CLARIFY** Final Call Type: **DISTURBANCE-CLARIFY**

Priority: 5 Queue Type: R How Received: 911 SYSTEM

Address: ALHAMBRA BLVD / L ST Community: SACRAMENTO

District: 6 Zone: 6D Grid: 0841

Telephone:

Call Taker: 944 STARK, JENNIFER 6189 Call Taker Desk: CS3

Initial Remarks:

ANOTHER CALLER ABOUT THIS SUBJ ADVISING HE NOW HAS ON A HOODED SWEATSHIRT

*** DO NOT CONTACT ***

Address: ALHAMBRA BLVD / L ST

Home Phone: **CELL PHONE** Bus Phone: **916** -

Clearance Remarks:

DUPLICATE CALL

Founded: Yes Report Expected: No

How Cleared: CANCEL

BOLO: N

Reporting Officer1: Reporting Officer2:

Cleared By: 944 STARK, JENNIFER 6189 Clearance Desk/Unit ID: CS3

Call Times:

Received: Mar-06-2017 14:20:56 Cleared: Mar-06-2017 14:21:51

Total - Units/Services: 0 Remarks: 0 Documents: 0 Entities: 0

Call Relation: **Duplicate**

Related Calls:

CP SA201764178 Prime

Chronological Events

03-06-2017 14:21:51 CS3 944 STARK, JENNIFER 6189 Call Update

Related Call:ADDED TO PRIME:SA17-64178

** END OF HARDCOPY **

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SACRAMENTO POLICE DEPARTMENT COMPLAINT HARDCOPY

CP 2017 - 64237 Reported: Mar-06-2017 14:59:48

Summary Information

Call Number: SA 2017-64237 Date/In Time: Mar-06-2017 14:59:48 Status: CLOSED

Initial Call Type: CSI REQUEST-CLARIFY Final Call Type: CSI REQUEST-CLARIFY

Priority: 7 Queue Type: R How Received: TELEPHONE

Address: 1201 ALHAMBRA BLVD Community: SACRAMENTO

Place Name: in SUTTER HEALTH URGENT CARE

District: 6 Zone: 6D Grid: 0841

Telephone:

Call Taker: 4145 GARBOUSHIAN, JULIE 6096 Call Taker Desk: SR9

Initial Remarks:

1B44****PHOTOS OF OFFICERS INJURIES

Complainant Name: 1B44

*** DO NOT CONTACT ***
Address: 1201_ALHAMBRA BLVD

Home Phone: **916** -

Clearance Remarks:

PHOTOS OF JOHN ANTHONY HERNANDEZ AT SUTTER, COLLECTED & BOOKED CLOTHING, PHOTOS OF TASERS AND BATON AT HOJ, SWABS AND TASER

Founded: Yes Report Expected: No

How Cleared: POLICE MATTER RESOLVED AT SCENE

BOLO: N Study: NA

Reporting Officer1: 4173 - ROSSI, STACI 6379

Reporting Officer2:

Cleared By: 4173 ROSSI, STACI 6379 () Clearance Desk/Unit ID: FI15

Call Times:

Received: Mar-06-2017 14:59:48 Dispatch: Mar-06-2017 15:00:02 En Route: Mar-06-2017 15:00:02 On Scene: Mar-06-2017 15:17:23 Cleared: Mar-06-2017 23:46:07

Total - Units/Services: 2 Remarks: 0 Documents: 0 Entities: 0

Call Relation: Follow-up

Related Calls:

Chronological Events

03-06-2017 14:59:59 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Update Related Call:ADDED TO PRIME:SA17-64178

03-06-2017 15:00:02 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change FI24 ER 4407 BEHRENS, REBECCA 6368

1201 ALHAMBRA BLVD

03-06-2017 15:00:02 SR9 4145 GARBOUSHIAN, JULIE 6096 Status Change FI24 ER 572 LINDNER, ROBERT 0538 1201 ALHAMBRA BLVD

For: 149 Tuesday March 16, 2021 Page: 1 of 3

SACRAMENTO POLICE DEPARTMENT COMPLAINT HARDCOPY

CP 2017 - 64237 Reported: Mar-06-2017 14:59:48

03-06-2017 15:00:13	SR9	4145 GARB0	OUSHIAN,	JULIE 6096	Call Update
Comp.adress:11	25 ALHA	AMBRA BLY	VD SACRA	MENTO CA	TO:
1201 ALHAMBI					

- 03-06-2017 15:00:13 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Update Comp.phone:C 916 TO: 916
- 03-06-2017 15:00:13 SR9 4145 GARBOUSHIAN, JULIE 6096 Call Update Comp.Name:UNK FEM TO:1B44
- 03-06-2017 15:17:23 FI24 4407 BEHRENS, REBECCA 6368 (FI24 OS 572 LINDNER, ROBERT 0538
- 03-06-2017 15:17:23 FI24 4407 BEHRENS, REBECCA 6368 (FI24 OS 4407 BEHRENS, REBECCA 6368 (FI24 OS 4407 BEHRENS, REBECCA 6368 (FI24 OS 4407 BEHRENS)
- 03-06-2017 17:55:02 SR9 3195 HANNUM, JAMIE 6032 Status Change FI15 ER 4173 ROSSI, STACI 6379 (1201 ALHAMBRA BLVD
- 03-06-2017 17:55:10 SR9 3195 HANNUM, JAMIE 6032 F115 ER 4173 ROSSI, STACI 6379 (FROM: P3// TO P6//
- 03-06-2017 18:02:23 FI15 4173 ROSSI, STACI 6379 (FI15 OS 4173 ROSSI, STACI 6379 (FI15 OS 4173 ROSSI, STACI 6379 (FI15 OS 4173 ROSSI)
- 03-06-2017 18:21:07 FI15 4173 ROSSI, STACI 6379 (FI15 ER 4173 ROSSI, STACI 6379 (PROPERTY
- 03-06-2017 18:44:46 FI15 4173 ROSSI, STACI 6379 (FI15 ER 4173 ROSSI, STACI 6379 HOJ
- 03-06-2017 18:56:18 FI15 4173 ROSSI, STACI 6379 (FI15 OS 4173 ROSSI, STACI 6379 (
- 03-06-2017 20:46:32 FI24 4407 BEHRENS, REBECCA 6368 (FI24 ER 4407 BEHRENS, REBECCA 6407 BEHRENS, REBECCA 6407 BEHRENS, REBECCA 6407 BEHREN
- 03-06-2017 20:46:32 FI24 4407 BEHRENS, REBECCA 6368 (FI24 ER 572 LINDNER, ROBERT 0538 PROPERTY E/B
- 03-06-2017 21:02:07 FI24 4407 BEHRENS, REBECCA 6368 () Status Change FI24 OS 4407 BEHRENS, REBECCA 6368 ()
- 03-06-2017 21:02:07 FI24 4407 BEHRENS, REBECCA 6368 () Status Change FI24 OS 572 LINDNER, ROBERT 0538
- 03-06-2017 21:51:44 FI15 4173 ROSSI, STACI 6379 (FI15 ER 4173 ROSSI, STACI 6379 (FI75 PROPERTY

SACRAMENTO POLICE DEPARTMENT COMPLAINT HARDCOPY

CP 2017 - 64237 Reported: Mar-06-2017 14:59:48 03-06-2017 21:55:34 FI24 4407 BEHRENS, REBE<u>CC</u>A 6368 (FI24 OS 4407 BEHRENS, REBECCA 6368 (03-06-2017 21:55:34 FI24 4407 BEHRENS, REBECCA 6368 (FI24 OS 572 LINDNER, ROBERT 0538 03-06-2017 22:00:28 FI24 4407 BEHRENS, REBECCA 6368 (Status Change FI24 IS 572 LINDNER, ROBERT 0538 03-06-2017 22:00:28 FI24 4407 BEHRENS, REBECCA 6368 (Status Change FI24 IS 4407 BEHRENS, REBECCA 6368 (03-06-2017 22:04:28 FI15 4173 ROSSI, S<u>TAC</u>I 6379 (FI15 OS 4173 ROSSI, STACI 6379 (03-06-2017 22:50:34 FI15 4173 ROSSI, STACI 6379 (Status Change FI15 ER 4173 ROSSI, STACI 6379 (CSI OFC 03-06-2017 22:53:00 FI15 4173 ROSSI, STACI 6379 (Status Change FI15 OS 4173 ROSSI, STACI 6379 (03-06-2017 23:46:07 FI15 4173 ROSSI, STACI 6379 (- Call Update Prime Unit changed: PRIME FOR SA17-64237 TO F115 03-06-2017 23:46:07 FI15 4173 ROSSI, <u>STAC</u>I 6379 () Status Change FI15 IS 4173 ROSSI, STACI 6379 03-06-2017 23:46:07 FI15 4173 ROSSI, <u>STAC</u>I 6379 (Call Cleared FI15 IS 4173 ROSSI, STACI 6379 CLEARED CASE SA64237 FOUNDED-Y REPORT-N CLEARED BY-A FINAL-CSI BOLO-N STUDY FLAG-NA REM-PHOTOS OF JOHN ANTHONY HERNANDEZ AT SUTTER, COLLECTED & BOOKED CLOTHING, PHOTOS OF TASERS AND BATON AT HOJ, SWABS AND TASER Dispatch Information Prime Unit: FI15 Type:FI 4173 ROSSI, STACI 6379 Dispatched: Mar-06-2017 17:55:02 En Route: Mar-06-2017 22:50:34 On Scene: Mar-06-2017 22:53:00 In Service: Mar-06-2017 23:46:07 Backup Unit: FI24 Type:FI 4407 BEHRENS, REBECCA 6368) 572 LINDNER, ROBERT 053 Dispatched: Mar-06-2017 15:00:02 En Route: Mar-06-2017 20:46:32 On Scene: Mar-06-2017 21:02:07 In Service: Mar-06-2017 22:00:28 ** END OF HARDCOPY **

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For: 149 Tuesday March 16, 2021

POLICE

SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

General Offense Information

Operational status: SUSPENDED-WARRANT REQUESTED

Reported on: Mar-06-2017 (Mon.) 1353 Occurred on: Mar-06-2017 (Mon.) 1353

Approved on: Mar-06-2017 (Mon.) by: 1076 - WERNER, BRADLEY D 7725

Report submitted by: 3212 - BOHRER, CYNTHEA 0250 Org unit: OOO PATROL DIST 6 DAY (TEAM 33)

Address: 1201 ALHAMBRA BLVD

Place: SUTTER HEALTH URGENT CARE

Municipality: SACRAMENTO County: SACRAMENTO COUNTY

District: 6 Beat: 6D Grid: 0841 Felony/Misdemeanor: MISDEMEANOR

Family violence: No

Offenses (Completed/Attempted)

Offense: #1 4801-5 69 PC RESIST/OBSTRCT EXEC OFC - COMPLETED

Location: PARKING LOTS / GARAGE

Offender suspected of using: N/A

Weapon type: PERSONAL WEAPONS (HANDS FIST/FEET)

Bias: NONE (NO BIAS)

Offense: #2 4801-0 148(A)(1)PC RESIST PEACE OFFCR - COMPLETED

Location: PARKING LOTS / GARAGE

Offender suspected of using: N/A

Bias: NONE (NO BIAS)

For: **4008** Printed On: **Oct-04-2019** (**Fri.**) Page **1** of **1224**



PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Attachment(s) - OTHER

Attachment Description: SCENE LOGS

Reference Number:

84178		CRIM	E SCEN	CRIME SCENE LOG REPORT #:
CORDER: MACLEAN / STIBERTS	してんてい			LOCATION: 1201 ALHAMBEA BLVD
ME: DATE: 3/6/17		SCENES	GT.: [14]	DATE: 3/6/17 TIME: [352] SCENE SGT.: FRENS WORTH STAGING LOCATION:
AME	BADGE #	AGENCY	ENTRY	REASON FOR ENTRY
BOHNR	25.0	5PD	1517	
LINDHER	FIZH	SFD	1518	
T. MORGADO	683	SPD	1530	
T. RODGERS	74	SPD	1530	
MOK	615	SPD	7891	
OCT. FARNSWORTH	3002	SPD		
WOMACK	621	SPD		
DIONNE	345	570		
71.677	345	SPD		The state of the s
VILLEBAS	820	SPD		
PIAZ	270	(J45		
CUNNINGHÀM	96H	570		
SPLING	2001	SPD		
KHULMANN	759	5 P D		
571651275	484	SPP		
HARRISON	980	SPD	1549	
DONNECL	407	SPD	0091	,
				Production of the Control of the Con

9

For: 4008 Printed On: Oct-04-2019 (Fri.) Page 2 of 1224



PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

ACHAMBRA (02) REPORT #: LOCATION: STAGING LOCATION: DATE: 3/6/17 TIME: 1353 SCENE SGT : FARNS WORTH CRIME SCENE LOG STIDERTS RECORDER: MACLEAN / CALL#: 17- 64178

CRIME:

NAME	BADGE #	AGENCY	ENTRY	REASON FOR ENTRY
OT. BEEZLY	5050	SPD	1191	
MCPHAIL	443	SPD	1191	
VASQUEZ	४०४	SPD	4291	
BEHLENS	४०६९	ads	1518	
DAVIS	340	ads	1645	
LT. CHAN	Iboh	aas	1645	
WARNER	3116	210	9541	
MACAULAY	717	C45	9591	
BoyD	865	SPUM	1610	
621665	0L9	SPD	0101	
ENGLE FIELD	563	SPD	0191	
. START	3039	597	0191	
NAM TOO	210	580	1610	
ROBISON	Hoh	ads	1610	
AYERS	كمل	0f2	0191	
HUNKAPILLER	حال	570	1610	
F. TOORNOOR	1	SPOM	012	



PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

RECORDER: MACLEAN / STIGERTS	16ERTS			
CRIME: DATE: 3 6/1	DATE: 3/6/17 TIME: 1353		GT.: FARIN	SCENE SGT.: FARNS WOLTH STAGING LOCATION:
NAME	BADGE #	AGENCY	ENTRY	REASON FOR ENTRY
BZIAN, D.	3080	SPD	019	
NAFF J.	3089	SPD	0/9/	
	5030	SPD	اھ	
MCCLOSKEY	4102	SPD	1610	
EDUNA 2DS J.		Sport	1834	
ļ	.)	SPOM	4881	
)	SPOR	1835	
LINDER	538	SPD	8151	
A CONTRACTOR OF THE CONTRACTOR				
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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Attachment(s) - OTHER

Attachment Description: SAC BEE ARTICLE Reference Number: SAC BEE ARTICLE



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PUBLIC HARDCOPY

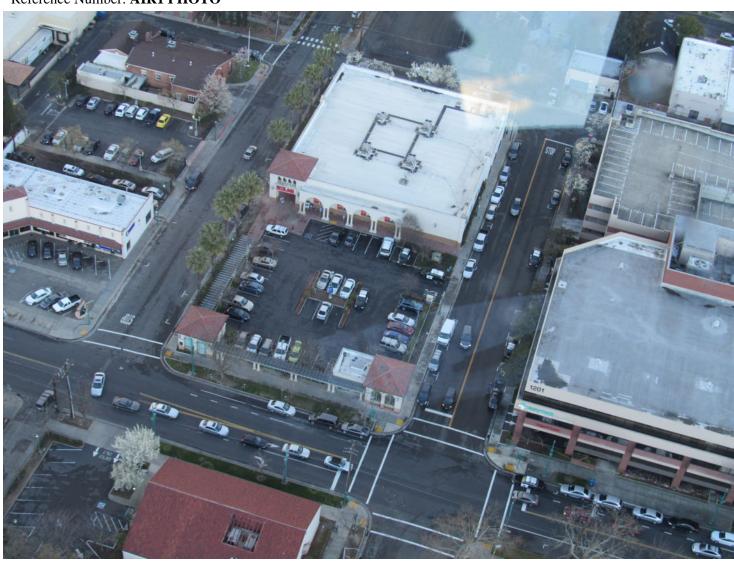
RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Attachment(s) - PHOTO

Attachment Description: **AIR1 PHOTO** Reference Number: **AIR1 PHOTO**



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PUBLIC HARDCOPY

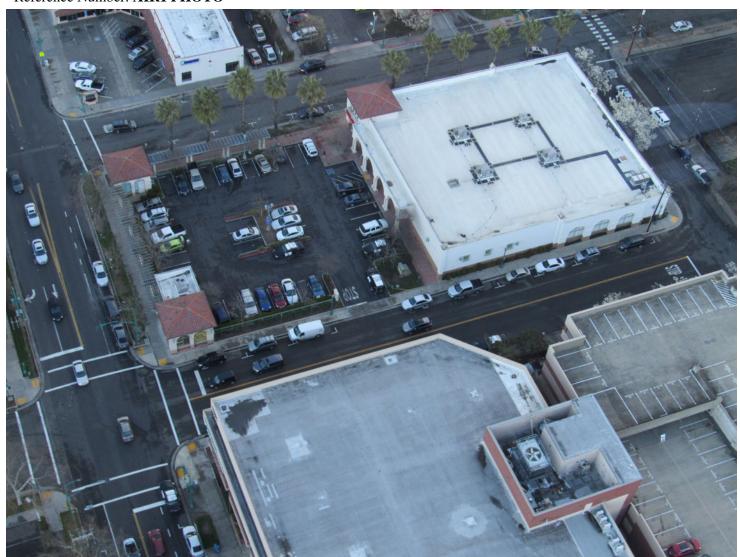
RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Attachment(s) - PHOTO

Attachment Description: **AIR1 PHOTO** Reference Number: **AIR1 PHOTO**



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PUBLIC HARDCOPY

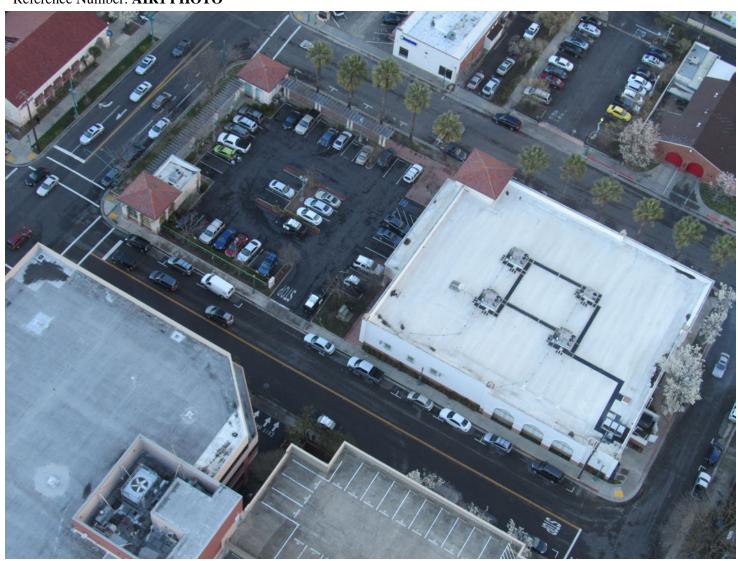
RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Attachment(s) - PHOTO

Attachment Description: **AIR1 PHOTO** Reference Number: **AIR1 PHOTO**



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RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Attachment(s) - ATTACHMENTS

Attachment Description: VILLEGAS TASER DOWNLOAD

Reference Number: VILLEGAS TASER



EVIDENCE (SYNC)

TASER Information

 Serial
 X00 215980

 Model
 TASER X26

 Firmware Version
 Rev 24

 Application Version
 3 15 51

Offline Report

Local TimezonePacific Standard Time (UTC 08 00)Generated On06 Mar 2017 20 09 19

Device (X26)

Seq #	Local Time [DD:MM:YYYY hh:mm:ss]	Event [Event Type]	Duration [Seconds]	Temp [Degrees Celsius]	Batt Remaining [%]
1	05 Jul 2006 10 30 51	Sync	05 Jul 2006 10	30 51 to 05 Jul 2006 10 3	0 51
2	05 Jul 2006 10 31 17	Trigger	5	27	99
3	05 Jul 2006 10 31 23	Trigger	5	28	99
4	05 Jul 2006 10 31 29	Trigger	5	28	99
5	08 Dec 2006 08 56 25	Trigger	5	30	98
6	08 Dec 2006 19 28 46	Trigger	5	24	97
7	08 Dec 2006 19 30 15	Trigger	3	27	97
8	11 Dec 2006 06 18 36	Trigger	1	27	96
9	11 Dec 2006 06 18 40	Trigger	1	26	96
10	11 Dec 2006 06 18 41	Trigger	1	27	96
11	11 Dec 2006 06 18 42	Trigger	1	27	96
12	09 Feb 2007 21 25 21	Trigger	1	25	95
13	22 Mar 2007 21 40 39	Trigger	2	27	94
14	13 Apr 2007 21 51 51	Trigger	2	27	94
15	13 Apr 2007 21 52 14	Trigger	5	27	94
16	10 May 2007 21 27 41	Trigger	1	29	93
17	17 Aug 2007 23 40 32	Trigger	1	26	92
18	21 Sep 2008 17 14 52	Trigger	5	30	90
19	03 May 2010 07 13 04	Trigger	1	23	85
20	03 May 2010 07 13 04	Trigger	1	23	85
21	03 May 2010 07 13 07	Trigger	1	24	85
22	03 May 2010 07 13 57	Trigger	1	25	0
23	03 May 2010 07 14 24	Trigger	1	25	0
24	03 May 2010 07 14 27	Trigger	1	27	0
25	03 May 2010 07 14 31	Trigger	1	27	0
26	03 May 2010 07 31 04	Trigger	1	23	0
27	08 Aug 2010 07 57 10	Trigger	5	25	99
28	10 Jan 2011 06 34 48	Trigger	5	9	98
29	20 Aug 2013 04 58 55	Trigger	5	30	88
30	19 Nov 2013 07 30 38	Trigger	5	25	87
31	19 Nov 2013 10 08 45	Sync	19 Nov 2013 08	3 50 41 to 19 Nov 2013 10	0 08 45

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Seq #	Local Time [DD:MM:YYYY hh:mm:ss]	Event [Event Type]	Duration [Seconds]	Temp [Degrees Celsius]	Batt Remaining [%]
32	08 Dec 2013 07 30 30	Trigger	5	18	87
33	09 Jun 2014 13 20 04	Trigger	2	29	85
34	09 Jun 2014 13 37 02	Trigger	3	35	84
35	02 Dec 2014 07 01 00	Trigger	15	27	83
36	02 Dec 2014 07 01 14	Trigger	13	28	82
37	02 Dec 2014 07 01 20	Trigger	5	28	81
38	02 Dec 2014 07 01 27	Trigger	5	29	81
39	21 Jun 2015 13 25 57	Trigger	8	32	78
40	21 Jun 2015 13 26 04	Trigger	6	32	78
41	21 Jul 2015 15 47 09	Sync	21 Jul 2015 15 2	29 21 to 21 Jul 2015 15 47	7 09
42	22 Jul 2015 07 30 07	Trigger	5	25	77
43	16 Aug 2015 06 20 06	Trigger	5	28	77
44	26 Jan 2016 11 27 43	Trigger	5	21	75
45	27 Jan 2016 06 41 19	Sync	27 Jan 2016 06	42 51 to 27 Jan 2016 06	41 19
46	30 May 2016 06 20 19	Trigger	0	25	74
47	30 May 2016 06 20 36	Trigger	1	25	74
48	30 May 2016 06 21 02	Trigger	2	27	74
49	30 May 2016 06 21 53	Trigger	1	29	74
50	30 May 2016 06 21 55	Trigger	1	29	74
51	30 May 2016 06 21 57	Trigger	1	29	74
52	30 May 2016 06 22 01	Trigger	1	29	74
53	30 May 2016 06 22 02	Trigger	1	29	74
54	30 May 2016 06 22 19	Trigger	1	30	73
55	30 May 2016 06 22 21	Trigger	1	30	73
56	30 May 2016 06 22 23	Trigger	1	30	73
57	30 May 2016 06 22 25	Trigger	1	30	73
58	30 May 2016 06 22 26	Trigger	1	30	73
59	30 May 2016 06 29 25	Sync	30 May 2016 06	31 23 to 30 May 2016 06	29 25
60	30 May 2016 06 32 25	Trigger	5	30	73
61	30 May 2016 06 32 38	Trigger	3	30	73
62	30 May 2016 06 32 48	Trigger	3	31	72
63	30 May 2016 06 32 49	Trigger	2	30	72
64	30 May 2016 06 32 56	Trigger	2	31	72
65	30 May 2016 06 32 59	Trigger	3	32	72
66	30 May 2016 06 33 12	Trigger	4	32	72
67	30 May 2016 06 33 13	Trigger	1	32	71
68	30 May 2016 06 33 19	Trigger	2	32	71
69	30 May 2016 06 33 22	Trigger	3	32	71
70	30 May 2016 06 33 37	Trigger	5	33	71
71	30 May 2016 06 33 45	Trigger	3	33	71
72	30 May 2016 06 33 47	Trigger	1	33	70
73	30 May 2016 06 33 48	Trigger	1	32	70
74	30 May 2016 06 33 53	Trigger	2	34	70
75	30 May 2016 06 33 55	Trigger	1	33	70
76	30 May 2016 06 33 57	Trigger	2	33	70

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Seq #	Local Time [DD:MM:YYYY hh:mm:ss]	Event [Event Type]	Duration [Seconds]	Temp [Degrees Celsius]	Batt Remaining
77	30 May 2016 06 35 17	Trigger	5	33	70
78	30 May 2016 06 35 27	Trigger	5	34	69
79	30 May 2016 06 35 35	Trigger	5	34	69
80	30 May 2016 06 35 44	Trigger	5	34	69
81	30 May 2016 06 36 09	Trigger	5	35	68
82	30 May 2016 06 55 56	Trigger	5	30	68
83	30 May 2016 06 56 06	Trigger	5	30	68
84	30 May 2016 06 56 15	Trigger	5	31	67
85	30 May 2016 07 00 26	Trigger	5	31	67
86	30 May 2016 07 12 10	Trigger	5	29	66
87	30 May 2016 07 20 29	Trigger	3	27	66
88	31 May 2016 05 54 05	Trigger	2	23	66
89	31 May 2016 05 54 14	Trigger	2	24	66
90	05 Jun 2016 05 51 57	Trigger	5	25	65
91	06 Jun 2016 07 25 39	Trigger	2	24	65
92	08 Jun 2016 07 27 51	Trigger	1	23	65
93	06 Mar 2017 14 40 10	Trigger	1	24	63
94	06 Mar 2017 20 08 53	Sync	06 Mar 2017 20) 13 23 to 06 Mar 2017 20	08 53

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Attachment(s) - ATTACHMENTS

Attachment Description: TASER DOWNLOAD SUMMARY

Reference Number:

SPD CASE #17-64178

The following is a summary and analysis of the TASER/CED download information using the off-line version of Evidence Sync for this incident:

CED's determined to be activated within the incident time frame based on download information:

CED Model/Serial Number X26 S/N: X00-215980 Assigned Officer (per Versadex Records)

Ofc. Villegas #820

Activation Number/Duration
1- (1 second)

CED Model/Serial Number

X26 S/N: X00-567570

 Device Time
 Clock drift
 Adjusted Actual Time

 14:40:10
 4:30 fast
 14:35:40

Assigned Officer (per Versadex Records)
Ofc. Hight #345

Activation Number/Duration Clock drift Adjusted Actual Time Device Time 14:42:29 6:17 fast 14:36:12 1-(3 seconds) 14:36:30 2-(5 seconds) 14:42:47 3-(6 seconds) 14:42:57 14:36:40 4-(5 seconds) 14.43.03 14:36:46 14:37:14 5-(5 seconds) 14:43:31

14:43:47

CED Model/Serial Number
X26 S/N: X00-369068
Activation Number/Duration

1-(5 seconds)

2-(5 seconds)

3-(5 seconds)

4-(5 seconds)

6-(3 seconds)

Assigned Officer (per Versadex Records)

Ofc. Dionne #395

 ion
 Device Time
 Clock drift
 Adjusted Actual Time

 14:54:51
 16:37 fast
 14:38:14

 14:54:57
 "
 14:38:20

 14:55:03
 "
 14:38:26

 14:55:11
 "
 14:38:34

CED's determined to have not been used during the incident time frame based on download information:

Assigned Officer (per Versadex Records)

CED Model/Serial Number X26 S/N: X00-216381 X26P S/N: X13001NXF X26 S/N: X00-564157

X26P S/N: X13002T5W

Ofc. Cunningham #496 Ofc. Harrison #980 Ofc. Paiz #270 Ofc. Spring #1006 Last Recorded Activation January 23, 2017 January 24, 2017 March 05, 2017

14:37:30

#1006 March 06, 2017 @ 05:01:13* *(adjusted actual time 05:10:19) clock drift was 09:06 slow

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Attachment(s) - OTHER

Attachment Description: **CERTIFICATE OF RELEASE**

Reference Number	er:		
42	And the second s		17 (A) 18
	SACRAMENTO POLICE DEPARTMEN		
-	CERTIFICATE OF RELEASE	CRIME RPT. NO	17-69178
	Penal Code 849	SPD NUMBER	17-64178
		NON BOOKING 🔀	
	As required by the provisions of Penal Code s that the taking into custody of	section 851.6 (as amended by Stat	s. 1975 Ch.1117), I hereby certify
	JOHN HERNANDEZ	on_3/6/17	by the Sacramento Police
	Subject's Name Department was a detention only, not an arres		7/17 0500 HRS Date and Time
	by the Sacramento Police Department pursua Code section 849, or paragraph (3) of subdiv pertinent portions of which appear below.	ant to the provisions of: paragraph ision (b) of Penal Code section 849	9, or Penal Code section 849.5,
		OFC DIONNE	395
		ARRESTING OFFICERS(S)	BADGE NUMBER(S) 3032
		SGT HALSTEAD SUPERVISORY OFFICER	BADGE NUMBER
	7/		plaint against the person arrested.
	If 849b(1) check one of the following:		
	1. Ascertainable evidence in	sufficient.	SAGRA+ RECOR RESIDENTIAL
	2. Complainant refused to pr	osecute.	AR SAR
	3. Admissible evidence insuf	ficient.	
	4. Arrestee exonerated.		2: 3 D S S O L O S O L
	5. Further investigation necessity	essary.	20 67
	LOONIG RE		LUNTH AN ESTUMMED
	desirable.	,	
	849b (3) The person was arrest dangerous drug and struther proceedings a	such person is delivered to a facilit	nce of a narcotic, drug, or restricted y or hospital for treatment and no
	Penal Code Section 849.5 provides: in any operating is filed chraging him/her with an off Thereafter, the arrest shall not be deemed a	ense, any record of arrest of the p	and released and no accusatory erson shall include a record of release.
	SPD 138 (Rev 03/13)		WHITE COPY TO RECORDS YELLOW COPY TO DETAINEE

For: **4008** Printed On: **Oct-04-2019** (**Fri.**) Page **13** of **1224**



PUBLIC HARDCOPY

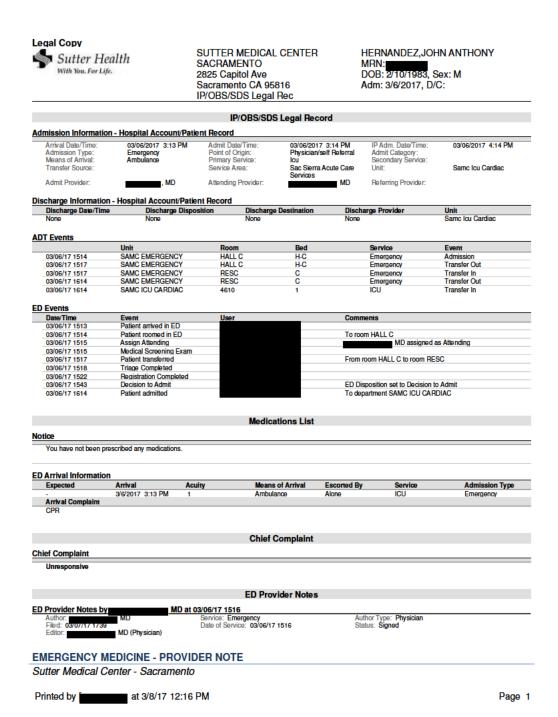
RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Attachment(s) - MEDICAL INFORMATION

Attachment Description: **RECORDS AS OF 3/6/17**

Reference Number:



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SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

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GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

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SUTTER MEDICAL CENTER SACRAMENTO 2825 Capitol Ave Sacramento CA 95816 IP/OBS/SDS Legal Rec HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

ED Provider Notes by MD at 03/06/17 1516 (continued)

PATIENT: John Anthony Hernandez HOME:

MRN: CELL: No cell phone on file.

PCP: No primary care provider on file. WORK:

DATE & TIME: 3/6/2017 1514 E-Mail: no e-mail address on file

HISTORY OF PRESENT ILLNESS:

SOURCE - History is obtained from EMS personnel History, Exam and ROS Limitations: intubated patient

CHIEF COMPLAINT: Unresponsive

HISTORY OF PRESENT ILLNESS:

Anthony John Hernandez is a 34 year old male with unknown medical history brought in code 3 after being found down and unresponsive. Per EMS, patient became unresponsive after he was tased by police just prior to arrival. Patient was reportedly unresponsive for 10-12 minutes before pulses were returned. CPR was initiated prior to EMS arrival. Patient was given 2 rounds of epinephrine, in conjunction with CPR, before pulses were returned. Patient was intubated prior to arrival in the emergency department.

MEDICAL HISTORY: he has no past medical history on file.

SURGICAL HISTORY: he has no past surgical history on file.

SOCIAL HISTORY:

Tobacco Use: Not Asked Alcohol Use: Not Asked Drug Use: Not Asked

CURRENT MEDICATIONS:

No medications the patient reported taking on file as of 03/06/2017

MEDICAL ALLERGIES:

Review of patient's allergies indicates not on file.

REVIEW OF SYSTEMS:

Review of Systems

Unable to perform ROS: Intubated

PHYSICAL EXAM:

Pulse: 64 | BP: (!) 140/104 | Respiratory Rate: 16 | | SpO2: 92 % on room air via ambu bag, while intubated, is considered adequate.

Physical Exam

Constitutional: He appears well-developed.

Young adult male is intubated prior to arrival

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

ED Provider Notes by

MD at 03/06/17 1516 (continued)

Head: Normocephalic and atraumatic.

Mouth/Throat: Oropharynx is clear and moist.

Eyes: No scleral icterus.

Pupils are midrange and non reactive

Neck: No JVD present. No thyromegaly present. Cardiovascular: Normal rate and regular rhythm.

No murmur heard.

Pulmonary/Chest: Effort normal. He has no wheezes.

No spontaneous respirations. Manual ventilation is performed with bag/valve device using 100% oxygen. There is equal chest rise bilaterally, no subcut air or crepitation, no rib crepitation or abnormal chest wall motion. Breath sounds equal bilaterally.

Abd/GI: Soft. He exhibits no mass. Genitourinary: Penis normal.

Genitourinary Comments: Scrotal contents normal Musculoskeletal: He exhibits no edema or deformity.

Neurological:

Comatose, no spontaneous respiration, no response to stimuli, flaccid bilaterally.

Skin: Skin is warm and dry. No rash noted.

There are 2 superficial abrasions on the right lateral orbital/temporal area of the face; and abrasion on the left wrist. There are multiple PW's on the posterior thorax and midback; no projectiles are present on inspection and palpation. .

EKG, BEDSIDE STUDIES & CLINICAL IMAGES (if obtained):

Results for orders placed or performed during the hospital encounter of 03/06/17 -CT BRAIN WO CONTRAST

Narrative

MRN: PATIENT: JOHN ANTHONY HERNANDEZ GENDER: Male AGE: 34 years DOB: 2/10/1983

PROCEDURE: CT BRAIN WO CONTRAST, 3/6/2017 4:01 PM

ACCESSION NUMBER(S): MCC17000603841

LOCATION: SAMC

CLINICAL INDICATION: ALOC.

COMPARISON: None

TECHNIQUE:

Axial non-contrast CT images were obtained from the skull base to the vertex at 5 mm slice thickness in brain and bone algorithm.

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

ED Provider Notes by

MD at 03/06/17 1516 (continued)

FINDINGS:

Brain: Ventricles and sulci appropriate for age. No midline shift, acute intracranial hemorrhage, or hydrocephalus. Probable small arachnoid cyst in the posterior aspect of the posterior fossa.

Orbits: Visualized portions are within normal limits.

Sinuses and otomastoids: No mucosal thickening or air-fluid

levels.

Calvarium: Unremarkable.

Visualized soft tissues: Unremarkable.

Impression

IMPRESSION:

No acute intracranial process.

Total exam Dose Length Product for a 671 mGy-cm Total exam CT Dose Index 38.3 mGy

Electronically Signed by

Med, Sutter Medical

Group 3/6/2017 4:35 PM

-CT CERVICAL SPINE WO CONTRAST

Narrative

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male

PROCEDURE: CT CERVICAL SPINE WO CONTRAST, 3/6/2017 4:01 PM

ACCESSION NUMBER(S): MCC17000604478

LOCATION: SAMC

CLINICAL INDICATION: Injury.

COMPARISON: None

TECHNIQUE: Helical non-contrast CT images were obtained through

the cervical spine with 2 mm sagittal and coronal reformats.

FINDINGS:

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SUTTER MEDICAL CENTER SACRAMENTO 2825 Capitol Ave Sacramento CA 95816 IP/OBS/SDS Legal Rec HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

ED Provider Notes by MD at 03/06/17 1516 (continued)

Osseous /disc structures: Normal bony alignment without fracture or dislocation. Vertebral body height well-maintained. Disc space height well-maintained.

Soft tissues: Mild patchy infiltrate in the medial right upper lung field. Patient is intubated.

C2-3: No bony canal or foraminal narrowing. C3-4: No bony canal or foraminal narrowing.

C4-5: No bony canal or foraminal narrowing.

C5-6: Mild dorsal disc bulge without significant bony canal or foraminal narrowing.

C6-7: No bony canal or foraminal narrowing. C7-T1: No bony canal or foraminal narrowing.

Impression

IMPRESSION:

No acute fracture or subluxation in the cervical spine.

Total exam Dose Length Product for a 580 mGy-cm Total exam CT Dose Index 22.1 mGy

Electronically Signed by Group 3/6/2017 4:41 PM

Med, Sutter Medical

-XR CHEST PORTABLE

Narrative

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male

PROCEDURE: XR CHEST PORTABLE, 3/6/2017 3:28 PM

ACCESSION NUMBER(S): MCD17000603785

LOCATION: SAMC

CLINICAL INDICATION: Chest Pain.

COMPARISON: None

TECHNIQUE: Single AP view of the chest.

FINDINGS:

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HERNANDEZ, JOHN ANTHONY MRN:

DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

ED Provider Notes by MD at 03/06/17 1516 (continued)

Mediastinum and hila: Hila appear mildly prominent.

Lines and tubes: Endotracheal tube tip 3.5 cm above the carina.

Lungs and pleura: Mild pulmonary vascular congestion with very mild interstitial prominence. No definite focal consolidation, pneumothorax or pleural effusion.

Bones and soft tissues: The osseous structures are unremarkable.

Impression

IMPRESSION:

Mild pulmonary vascular congestion with mild interstitial prominence may represent mild interstitial pulmonary edema.

Mild prominence the hila may simply represent prominence of the central pulmonary arteries however underlying adenopathy is not excluded.

When patient is able recommend dedicated PA and lateral views of the chest to better evaluation.

3/6/2017 4:10 PM

Electronically Signed by MD, Sutter Medical Group

-XR CHEST PORTABLE

Narrative

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 **GENDER: Male**

PROCEDURE: XR CHEST PORTABLE, 3/6/2017 5:02 PM

ACCESSION NUMBER(S): MCD17000605811

LOCATION: SAMC

COMPARISON: 3/6/2016 at 3:45 PM

CLINICAL INDICATION: ET Tube. Line placement.

TECHNIQUE: Portable AP view of the chest.

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HERNANDEZ, JOHN ANTHONY MRN:

DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

MD at 03/06/17 1516 (continued)

FINDINGS:

ET tube remains in place with distal tip positioned approximately 3 cm above the carina. There has been interval placement of a nasogastric tube, with distal end extending into the left upper quadrant of the abdomen, although distal tip is excluded from the field-of-view. Lungs are bilaterally well expanded. No confluent areas of lung consolidation or pleural effusions. Heart and mediastinal structures appear stable. There is persistent prominence of the central pulmonary vasculature noted bilaterally, right greater than left.

Impression IMPRESSION:

- 1. Interval placement of nasogastric tube. ET tube remains in satisfactory position.
- 2. Persistent prominent central pulmonary vascular congestion, right greater than left, without significant interval change. Cannot exclude underlying adenopathy.

Electronically Signed by 3/6/2017 5:54 PM

MD, Sutter Medical Group

-XR CHEST PORTABLE

Narrative

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male

PROCEDURE: XR CHEST PORTABLE, 3/7/2017 11:29 AM

ACCESSION NUMBER(S): MCD17000612385

LOCATION: SAMC

CLINICAL INDICATION: Post-Procedure.

COMPARISON: 3/6/2017

TECHNIQUE: Portable semi-upright frontal examination of the chest. Exam is limited by material external to the patient,

possibly a heating blanket.

FINDINGS:

Heart and Mediastinum: The heart is normal in size. The mediastinum is normal. The aorta is normal.

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

ED Provider Notes by MD at 03/06/17 1516 (continued)

Tubes and Lines: Endotracheal tube is seen with its tip approximately 4.4 cm above the carina. Nasogastric tube has its tip in the stomach. Left subclavian vein triple-lumen catheter has its tip in the low SVC.

Lungs: The lungs are clear. There is no pleural effusion or pneumothorax.

Osseous Structures/Other: Osseous structures are unremarkable.

Impression

IMPRESSION:

Life-support hardware is in satisfactory position. No pneumothorax.

Limited exam, as above.

3/7/2017 12:24 PM

Electronically Signed by MD, Sutter Medical Group

-EKG

-EKG		
Result	Value	Ref Range
Ventricular Rate	66	BPM
Atrial Rate	66	BPM
P-R Interval	186	ms
QRS Duration	102	ms
Q-T Interval	390	ms
QTC Calculation(Bezet)	408	ms
P Axis	54	degrees
R Axis	71	degrees
T Axis	40	degrees
Diagnosis	Normal sinus rhythm	

Nonspecific ST abnormality Diagnosis Diagnosis Abnormal ECG No previous ECGs available Diagnosis

-FKG

Result	Value	Ref Range
Ventricular Rate	99	BPM
Atrial Rate	99	BPM
P-R Interval	138	ms
QRS Duration	114	ms
Q-T Interval	404	ms
QTC Calculation(Bezet)	518	ms
P Axis	59	degrees
R Axis	63	degrees

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED	Provi	der l	Notes	(cont	inued)	۱

ED Provider Notes (continued)				
ED Provider Notes by	MD at 03/06/17 1516 (continued)			
T Axis	36	degrees		
Diagnosis	Normal sinus rhythm			
Diagnosis	Prolonged QT			
Diagnosis	Abnormal ECG			
Diagnosis	When compared with ECG of 06- MAR-2017 15:17, (unconfirmed)			
Diagnosis	Vent. rate has increased BY 33 BPM			
Diagnosis	ST no longer depressed in Inferior leads			
Diagnosis	ST elevation has replaced ST depression in Anterior leads			
Diagnosis -ABG W LYTES LACTAT	QT has lengthened E ICA			
Result	Value	Ref Range		
Puncture Site	Right Brachial	•		
Time Drawn	15:30			
Notified Whom	md management			
Date Notified	03/06/2017			
Time Notified	15:43			
Notified by Whom	cragerrs			
Body Temperature	38.1	DegC		
, ,		80 - 100		
PO2 Measured	424 (H)	mmHq		
		80 - 100		
pO2, Temp Corrected	431 (H)	mmHg		
		14.1 - 16.3		
Measured Hemoglobin	13.1 (L)	g/dL		
Carboxyhemoglobin	0.3 (L)	0.5 - 1.5 %		
Methemoglobin	1.2	0.0 - 1.5 %		
O2 Content	19.0	15.0 - 23.0		
Oxygen Capacity	17.9	13.0 - 20.0		
Ozygen Capacity O2 Saturation	97	94 - 99 %		
	51	135 - 148		
Sodium	148	mmol/L		
Potassium	5.0	3.5 - 5.3 mmol/L		
Lactate	22.2 (HH)	0.4 - 2.0 mmol/L		
Ionized Calcium	1.38 (H)	1.13 - 1.32 mmol/L		
O2 Device	Ventilator			
FiO2	100.0			
Mode	VC			
Mech Vt	475	mL		
Mech. Resp. Rt	18.0			
PosEnd Exp Pres	5.0			

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

	Notes	

	D at 03/06/17 1516 (continued)		
Comment			
-ABG W LYTES LACTATE ICA Result	Value	Ref Range	
Puncture Site	Right Brachial	nei halige	
Allen's Test	Passed		
Time Drawn	15:58		
Notified Whom	MD		
Date Notified	03/06/2017		
Time Notified	16:02		
Notified by Whom	avem		
Body Temperature	36.8	DegC	
pH Measured	6.678 (LL)	7.350 -	
		7.450	
pCO2, Measured	57.0 (H)	35.0 - 45.0	
		mmHg 80 - 100	
PO2 Measured	477 (H)	mmHg	
	0.000 (11)	7.350 -	
pH, Temp Corrected	6.680 (LL)	7.450	
nCO2 Town Corrected	EC E (LI)	35.0 - 45.0	
pCO2, Temp Corrected	56.5 (H)	mmHg	
pO2, Temp Corrected	476 (H)	80 - 100	
poz, romp corrected	470 (11)	mmHg	
Bicarbonate	6.5 (L)	20.0 - 26.0	
	(-/	mmol/L	
Base Deficit	30.0 (H)	0.0 - 3.0 mmol/L	
		14.1 - 16.3	
Measured Hemoglobin	11.6 (L)	g/dL	
Carboxyhemoglobin	0.3 (L)	0.5 - 1.5 %	
Methemoglobin	1.3	0.0 - 1.5 %	
O2 Content	17.2	15.0 - 23.0	
Oxygen Capacity	15.9		
O2 Saturation	97	94 - 99 %	
Sodium	146	135 - 148	
		mmol/L	
Potassium	5.2	3.5 - 5.3	
		mmol/L 0.4 - 2.0	
Lactate	26.2 (HH)	mmol/L	
		1.13 - 1.32	
Ionized Calcium	1.17	mmol/L	
O2 Device	Ventilator		
Mode	acvc		
Mech Vt	475	mL	
Mech. Resp. Rt	22.0		
Comment			
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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

ED Provider Notes by MD at 0	03/06/17 1516 (continued)		
Result	Value	Ref Range	
Puncture Site Allen's Test	Right Radial		
Time Drawn	Passed 18:40		
Notified Whom	DonesRN		
Date Notified	03/06/2017		
Time Notified	18:50		
Notified by Whom	TurnerRT	Dago	
Body Temperature	33.4	DegC	
pH Measured	7.387	7.350 -	
•		7.450	
pCO2, Measured	34.6 (L)	35.0 - 45.0	
•	• • •	mmHg	
PO2 Measured	99	80 - 100	
		mmHg	
pH, Temp Corrected	7.440	7.350 -	
• • •		7.450	
pCO2, Temp Corrected	29.6 (L)	35.0 - 45.0	
	. ,	mmHg	
pO2, Temp Corrected	80	80 - 100	
• • •		mmHg	
Bicarbonate	20.3	20.0 - 26.0	
		mmol/L	
Base Deficit	4.0 (H)	0.0 - 3.0	
		mmol/L	
Measured Hemoglobin	12.3 (L)	14.1 - 16.3	
O-shh	0.0 (1.)	g/dL	
Carboxyhemoglobin	0.2 (L)	0.5 - 1.5 %	
Methemoglobin	0.8	0.0 - 1.5 %	
O2 Content	16.6	15.0 - 23.0	
Oxygen Capacity	16.9	04 000/	
O2 Saturation	95	94 - 99 %	
Sodium	141	135 - 148	
		mmol/L	
Potassium	3.4 (L)	3.5 - 5.3	
	` '	mmol/L	
Lactate	4.9 (HH)	0.4 - 2.0	
	(,	mmol/L	
Ionized Calcium	1.05 (L)	1.13 - 1.32	
A-D00		mmol/L	
AaDO2	101.7 (H)	7 - 14	
O2 Device	Ventilator		
FiO2	30.0		
End-Tidal CO2	25 DDVC		
Mode	PRVC		
Mech Vt	480	mL	
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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)			
ED Provider Notes by MD at 03/0	6/17 1516 (continued)		
Mech. Resp. Rt PosEnd Exp Pres Comment	20.0 5.0		
-ABG W LYTES LACTATE ICA Result	Value	Ref Range	
Puncture Site	Specimen drawn from arterial line		
Time Drawn Body Temperature	23:00 33.5	DegC	
pH Measured	7.234 (L)	7.350 - 7.450	
pCO2, Measured	46.1 (H)	35.0 - 45.0 mmHg	
PO2 Measured	92	80 - 100 mmHg	
pH, Temp Corrected	7.282 (L)	7.350 - 7.450	
pCO2, Temp Corrected	39.6	35.0 - 45.0 mmHg	
pO2, Temp Corrected	74 (L)	80 - 100 mmHg 20.0 - 26.0	
Bicarbonate	19.0 (L)	mmol/L 0.0 - 3.0	
Base Deficit	8.3 (H)	mmol/L 14.1 - 16.3	
Measured Hemoglobin Carboxyhemoglobin	13.9 (L) 0.6	g/dL 0.5 - 1.5 %	
Methemoglobin	0.6	0.0 - 1.5 %	
O2 Content	18.3	15.0 - 23.0	
Oxygen Capacity	19.1	10.0	
O2 Saturation	93 (L)	94 - 99 %	
Sodium	142	135 - 148 mmol/L	
Potassium	3.0 (L)	3.5 - 5.3 mmol/L	
Lactate	1.6	0.4 - 2.0 mmol/L	
Ionized Calcium	1.09 (L)	1.13 - 1.32 mmol/L	
AaDO2	95.7 (H)	7 - 14	
O2 Device	Ventilator		
FiO2	30.0		
End-Tidal CO2 Mode	35 PRVC		
Mech Vt	480	mL	
Mech. Resp. Rt	22.0	THE .	

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED	Prov	ider	Notes	conti	nued)

	6/17 1516 (continued)	·
PosEnd Exp Pres Comment	5.0	
-ABG W LYTES LACTATE ICA		
Result	Value	Ref Range
Puncture Site	Specimen drawn from	-
	arterial line	
Time Drawn	02:34	DC
Body Temperature	34.7	DegC
pH Measured	7.365	7.350 - 7.450
		35.0 - 45.0
pCO2, Measured	33.5 (L)	mmHa
PO2 Measured	404 (LI)	80 - 100
PO2 Measured	181 (H)	mmHg
pH, Temp Corrected	7.398	7.350 -
pri, remp corrected	7.000	7.450
pCO2, Temp Corrected	30.3 (L)	35.0 - 45.0
	. ,	mmHg 80 - 100
pO2, Temp Corrected	169 (H)	mmHg
		20.0 - 26.0
Bicarbonate	18.7 (L)	mmol/L
Base Deficit	5.7 (H)	0.0 - 3.0
Dase Delicit	5.7 (H)	mmol/L
Measured Hemoglobin	13.4 (L)	14.1 - 16.3
· ·		g/dL
Carboxyhemoglobin Methemoglobin	0.2 (L)	0.5 - 1.5 %
O2 Content	0.8 18.7	0.0 - 1.5 % 15.0 - 23.0
Oxygen Capacity	18.4	15.0 - 25.0
O2 Saturation	98	94 - 99 %
Sodium	140	135 - 148
Sodium	140	mmol/L
Potassium	3.2 (L)	3.5 - 5.3
T Ottobium	0.L (L)	mmol/L
Lactate	1.6	0.4 - 2.0
		mmol/L 1.13 - 1.32
Ionized Calcium	1.01 (L)	mmol/L
AaDO2	47.0 (H)	7 - 14
O2 Device	Ventilator	
FiO2	35.0	
SPO2	100	mmHg
End-Tidal CO2	28	
Mode	PRVC	1
Mech Vt	520	mL
Mech. Resp. Rt	24.0	

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SUTTER MEDICAL CENTER SACRAMENTO 2825 Capitol Ave Sacramento CA 95816 IP/OBS/SDS Legal Rec

HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

	ED Provider Notes (cor	ntinued)
ED Provider Notes by MD at 03/	06/17 1516 (continued)	
PosEnd Exp Pres	5.0	
Peak Insp Press	24.0	
Comment		
-ABG W LYTES LACTATE ICA		
Result	Value	Ref Range
Puncture Site	Specimen drawn from arterial line	
Time Drawn	anenai line 09:26	
Body Temperature	36.0	DegC
, ,		7.350 -
pH Measured	7.322 (L)	7.450
nCOO Massured	00.4	35.0 - 45.0
pCO2, Measured	38.4	mmHg
PO2 Measured	119 (H)	80 - 100
r Oz Wcasulca	113 (11)	mmHg
pH, Temp Corrected	7.336 (L)	7.350 -
	. ,	7.450 35.0 - 45.0
pCO2, Temp Corrected	36.8	mmHa
		80 - 100
pO2, Temp Corrected	113 (H)	mmHq
Bicarbonate	19.4 (L)	20.0 - 26.0
bicarbonate	19.4 (L)	mmol/L
Base Deficit	6.1 (H)	0.0 - 3.0
	()	mmol/L
Measured Hemoglobin	13.1 (L)	14.1 - 16.3 a/dL
Carboxyhemoglobin	0.3 (L)	0.5 - 1.5 %
Methemoglobin	0.7	0.0 - 1.5 %
O2 Content	18.0	15.0 - 23.0
Oxygen Capacity	18.0	
O2 Saturation	97	94 - 99 %
Sodium	140	135 - 148
Codidiii	140	mmol/L
Potassium	4.1	3.5 - 5.3
		mmol/L 0.4 - 2.0
Lactate	1.7	mmol/L
		1.13 - 1.32
Ionized Calcium	0.99 (L)	mmol/L
AaDO2	58.1 (H)	7 - 14
O2 Device	Ventilator	
FiO2	30.0	
SPO2	100	mmHg
End-Tidal CO2 Mode	35 pp/0	
Mech Vt	prvc 520	mL
WICOIT VI	320	IIIL

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)				
ED Provider Notes by MD at 03	/06/17 1516 (continued)			
Mech. Resp. Rt	24.0			
PosEnd Exp Pres	5.0			
Comment '				
-ABG W LYTES LACTATE ICA				
Result	Value	Ref Range		
Puncture Site	Specimen drawn from	-		
	arterial line			
Time Drawn	15:08			
Body Temperature	35.8	DegC		
pH Measured	7.354	7.350 -		
primododiod	7.00-7	7.450		
pCO2, Measured	36.6	35.0 - 45.0		
p = = 1,		mmHg		
PO2 Measured	150 (H)	80 - 100		
	, ,	mmHg		
pH, Temp Corrected	7.371	7.350 - 7.450		
		7.450 35.0 - 45.0		
pCO2, Temp Corrected	34.7 (L)	mmHq		
		80 - 100		
pO2, Temp Corrected	143 (H)	mmHg		
		20.0 - 26.0		
Bicarbonate	19.9 (L)	mmol/L		
5 5 6 8		0.0 - 3.0		
Base Deficit	5.0 (H)	mmol/L		
Manageral Hamanishin	40.4 (1)	14.1 - 16.3		
Measured Hemoglobin	12.4 (L)	g/dL		
Carboxyhemoglobin	0.1 (L)	0.5 - 1.5 %		
Methemoglobin	0.8	0.0 - 1.5 %		
O2 Content	17.3	15.0 - 23.0		
Oxygen Capacity	17.1			
O2 Saturation	98	94 - 99 %		
Sodium	138	135 - 148		
Codiditi		mmol/L		
Potassium	3.9	3.5 - 5.3		
		mmol/L		
Lactate	1.8	0.4 - 2.0		
		mmol/L		
Ionized Calcium	0.94 (L)	1.13 - 1.32 mmol/L		
AaDO2	31 3 (LI)	7 - 14		
O2 Device	31.2 (H) Ventilator	7 - 14		
FiO2	30.0			
SPO2	100	mmHg		
End-Tidal CO2	35			
Mode	prvc			
Mech Vt	450	mL		
		Page 15		
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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)			
ED Provider Notes by	MD at 03/06/17 1516 (continued)		
Mech. Resp. Rt	24.0		
PosEnd Exp Pres	5.0		
Comment			
-TROPONIN I			
Result Va	lue	Ref Range	
	.02	<0.06 ng/mL	
-COMPREHENSIVE METABO	LIC PANEL W GFR		
Result	Value	Ref Range	
Sodium	142	136 - 145 mmol/L	
Potassium	4.8	3.5 - 5.1 mmol/L	
Chloride	103	98 - 107 mmol/L	
CO2 (Bicarbonate)	8 (LL)	21 - 32 mmol/L	
Anion Gap	35.8 (H)	6 - 16 mmol/L	
Glucose	222 (H)	70 - 100 mg/dL	
BUN	20	6 - 25 mg/dL	
Creatinine	2.03 (H)	0.50 - 1.30 mg/dL	
GFR Est-Other	42 (L)	>60 See Cmnt	
GFR Est-African American	48 (L)	>60 See Cmnt	
Calcium	10.3 (H)	8.2 - 10.2 mg/dL	
Total Protein	8.2	6.4 - 8.2 g/dL	
Albumin	4.4	3.2 - 4.7 g/dL	
Total Bilirubin	0.9	<1.1 mg/dL	
Alkaline Phosphatase	72	26 - 137 U/L	
AST	195 (H)	0 - 37 U/L	
ALT	91 (H)	12 - 78 U/L	
-MAGNESIUM	_		
	lue	Ref Range	
) (H)	1.5 - 2.5 mg/dL	
-N-TERM PRO-BRAIN NATRI		B / B	
	lue	Ref Range	
NT Pro BNP 26		<300 pg/mL	
-DRUGS OF ABUSE SCREEN		B / B	
Result	Value	Ref Range	
Amphetamines, Urine	Pos (A)	Neg	
Barbiturates, Urine	Neg	Neg	
Benzodiazepine, Urine	Neg	Neg	
Cocaine, Urine	Neg	Neg	
Methadone, Urine	Neg	Neg	
Opiates, Urine	Neg	Neg	
PCP, Urine	Neg	Neg	
Cannabinoids, Urine	Neg	Neg	
Ecstasy, Urine	Neg	Neg	
-ALCOHOL, ETHYL (ETOH)	Value	Dof Dongo	
Result	Value	Ref Range	
Alcohol, Serum	<10	<10 mg/dL	
-CK, CKMB AND PERCENT	lue	Def Denge	
Result Va	lue	Ref Range	

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

0.34 - 4.82 uIU/mL

ED Provider Notes (continued)

ED Provider Notes by MD at 03/06/17 1516 (continued)

CPK 6667 (H) 39 - 308 U/L 0.0 - 3.6 ng/mL **CK MB** 93.0 (H) CK MB % 0.0 - 3.0 % 1.4

-THYROID STIMULATING HORMONE (TSH)

Result Ref Range Value 0.34 - 4.82 uIU/mL TSH 2.50

-ACETAMINOPHEN

Result Value **Ref Range** Acetaminophen <2.0 (L) 10.0 - 30.0 ug/mL

-CK, CKMB AND PERCENT

Ref Range Result Value **CPK** 14061 (H) 39 - 308 U/L CK MB 39.8 (H) 0.0 - 3.6 ng/mL CK MB % 0.3 0.0 - 3.0 %

-SALICYLATE

Result Value **Ref Range** 2.8 - 20.0 mg/dL Salicylate 2.0 (L)

-THYROID STIMULATING HORMONE (TSH) Ref Range

Result Value TSH 5.27 (H)

-MAGNESIUM

Value Result Ref Range Magnesium 1.5 - 2.5 mg/dL 4.3 (H) -PHÖSPHORUS Value **Ref Range** Result **Phosphorus** 5.9 (H) 2.5 - 4.9 mg/dL

-BASIC METABOLIC PANEL W GFR

Result Value **Ref Range** Sodium 144 136 - 145 mmol/L 3.5 - 5.1 mmol/L Potassium 3.9 98 - 107 mmol/L Chloride 108 (H) CO2 (Bicarbonate) 22 21 - 32 mmol/L 17.9 (H) Anion Gap 6 - 16 mmol/L 70 - 100 mg/dL Glucose 125 (H) BUN 19 6 - 25 mg/dL Creatinine 2.03 (H) 0.50 - 1.30 mg/dL GFR Est-Other >60 See Cmnt 42 (L) GFR Est-African American 48 (L) >60 See Cmnt Calcium 7.3 (L) 8.2 - 10.2 mg/dL

-TROPONIN I Result Value Ref Range Troponin I 0.45 (H) <0.06 ng/mL -MAGNESIUM Value Ref Range Result Magnesium 4.2 (H) 1.5 - 2.5 mg/dL -MAGNESIUM Value **Ref Range** Result

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

		ED Provider Notes (c	ontinued)	
ED Provider Notes by	MD at 03/06/	17 1516 (continued)		
Magnesium	3.7 (H)		1.5 - 2.5 mg/dL	
-BASIC METABOLIC PAN	` '			
Result		Value	Ref Range	
Sodium		143	136 - 145 mmol/L	
Potassium		3.0 (L)	3.5 - 5.1 mmol/L	
Chloride		109 (H)	98 - 107 mmol/L	
CO2 (Bicarbonate)		21	21 - 32 mmol/L	
Anion Gap		16	6 - 16 mmol/L	
Glucose		125 (H)	70 - 100 mg/dL	
BUN		26 (H)	6 - 25 mg/dL	
Creatinine		1.81 (H)	0.50 - 1.30 mg/dL	
GFR Est-Other		48 (L)	>60 See Cmnt	
GFR Est-African American		55 (L)	>60 See Cmnt	
Calcium	-	`'.	8.2 - 10.2 mg/dL	
-BASIC METABOLIC PAN		7.1 (L)	6.2 - 10.2 IIIg/UL	
Result		Value	Ref Range	
Sodium		value 142	136 - 145 mmol/L	
Potassium		3.2 (L)	3.5 - 5.1 mmol/L	
		\'		
Chloride		110 (H)	98 - 107 mmol/L	
CO2 (Bicarbonate)		20 (L)	21 - 32 mmol/L	
Anion Gap		15.2	6 - 16 mmol/L	
Glucose		108 (H)	70 - 100 mg/dL	
BUN		30 (H)	6 - 25 mg/dL	
Creatinine		2.26 (H)	0.50 - 1.30 mg/dL	
GFR Est-Other		36 (L)	>60 See Cmnt	
GFR Est-African American		42 (L)	>60 See Cmnt	
Calcium		6.8 (L)	8.2 - 10.2 mg/dL	
-TROPONIN I				
Result	Value		Ref Range	
Troponin I	3.41 (H)		<0.06 ng/mL	
-PHOSPHORUS				
Result	Value		Ref Range	
Phosphorus	4.7		2.5 - 4.9 mg/dL	
-PHOSPHORUS				
Result	Value		Ref Range	
Phosphorus	4.9		2.5 - 4.9 mg/dL	
-OCCULT BLOOD, GASTI				
Result	Value		Ref Range	
Gastric pH	Unable to pe	erform due to		
Gastric pri	interfering s	ubstance		
Occult Blood, Gastric	Pos (A)		Neg	
-OCCULT BLOOD (1-3 SP	ECIMENS)			
Result	Value		Ref Range	
Collection Date and Time	3/6/17 2326		•	
Stool test for blood	Neg		Neg	
-CK, CKMB AND PERCEN			-	
Result	Value		Ref Range	
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6.8 (L)

HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

ED Provider Notes by MD at 03/06/17 1516 (continued) CPK 70170 (H) 902.8 (H) CK MB CK MB % 1.3 -MAGNESIUM Result Value Magnesium 3.7 (H)

BASIC METABOLIC PANEL W GFR Result Value Sodium 143 Potassium 4.5 Chloride 110 (H) CO₂ (Bicarbonate) 23 Anion Gap 14.5 Glucose 92 31 (H) BUN Creatinine 3.07 (H) GFR Est-Other 25 (L) GFR Est-African American 29 (L)

Calcium -PHOSPHORUS

Result Value Phosphorus 9.0 (H) CBC WITH AUTOMATED DIFFERENTIAL

Result Value White Blood Cell Count 9.6 Red Blood Cell Count 4.14 (L) Hemoglobin 13.6 Hematocrit 44.3 MCV 107 (H) MCH 32.9 MCHC 30.7 (L) RDW 12.9 Platelet Count 228 Neutrophil 52 Neutrophil Bands 4 Lymphocyte 38 Monocyte 5 Eosinophil Differential Type Manual WBC Morphólogy Normal **RBC Morphology** Aniso

Rare Platelet Morphology Large plt

-CBC WITH AUTOMATED DIFFERENTIAL Printed by at 3/8/17 12:16 PM

39 - 308 U/L 0.0 - 3.6 ng/mL 0.0 - 3.0 %

Ref Range 1.5 - 2.5 mg/dL

Ref Range 136 - 145 mmol/L 3.5 - 5.1 mmol/L 98 - 107 mmol/L 21 - 32 mmol/L 6 - 16 mmol/L 70 - 100 mg/dL 6 - 25 mg/dL 0.50 - 1.30 mg/dL >60 See Cmnt >60 See Cmnt 8.2 - 10.2 mg/dL

Ref Range 2.5 - 4.9 mg/dL

Ref Range 4.0 - 11.0 K/uL 4.4 - 6.0 M/uL 13.5 - 18.0 g/dL 40.0 - 52.0 % 80.0 - 100.0 fL 27.0 - 33.0 pg 31.0 - 36.0 g/dL <16.4 % 150 - 400 K/uL 49 - 64 % 0 - 10 % 26 - 46 % 0 - 12 % 0 - 5 %

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

	ED Provider Notes (c	ontinued)
ED Provider Notes by	MD at 03/06/17 1516 (continued)	
Result	Value	Ref Range
White Blood Cell Count	21.9 (H)	4.0 - 11.0 K/uL
Red Blood Cell Count	3.98 (L)	4.4 - 6.0 M/uL
Hemoglobin	13.1 (L)	13.5 - 18.0 g/dL
Hematocrit	37.4 (L)	40.0 - 52.0 %
MCV	94	80.0 - 100.0 fL
MCH	32.9	27.0 - 33.0 pg
MCHC	35.0	31.0 - 36.0 g/dL
RDW	12.7	<16.4 %
Platelet Count	187	150 - 400 K/uL
Differential Type	Automated	
Neutrophil %	89 (H)	49.0 - 74.0 %
Lymphocyte %	7 (L)	26.0 - 46.0 %
Monocyte %	4	2.0 - 12.0 %
Eosinophil %	0	0.0 - 5.0 %
Basophil %	0	0.0 - 2.0 %
Abs. Neutrophil	19.6 (H)	2.0 - 8.0 K/uL
Abs. Lymphocyte	1.6	1.0 - 5.1 K/uL
Abs. Monocyte	0.8	0.0 - 0.8 K/uL
Abs. Eosinophil	0.0	0.0 - 0.5 K/uL
Abs. Basophil	0.0	0.0 - 0.2 K/uL
-CBC WITH AUTOMATED		0.0 - 0.2 TV dE
Result	Value	Ref Range
White Blood Cell Count	14.0 (H)	4.0 - 11.0 K/uL
Red Blood Cell Count	3.82 (L)	4.4 - 6.0 M/uL
Hemoglobin	12.7 (L)	13.5 - 18.0 g/dL
Hematocrit	35.8 (L)	40.0 - 52.0 %
MCV	94	80.0 - 100.0 fL
MCH	33.2 (H)	27.0 - 33.0 pg
MCHC	35.5	31.0 - 36.0 g/dL
RDW	13.1	<16.4 %
Platelet Count	150	150 - 400 K/uL
Differential Type	Automated	130 - 400 IVUL
Neutrophil %	92 (H)	49.0 - 74.0 %
Lymphocyte %		26.0 - 46.0 %
	6 (L) 2	2.0 - 12.0 %
Monocyte %	0	2.0 - 12.0 % 0.0 - 5.0 %
Eosinophil %	0	
Basophil %	-	0.0 - 2.0 %
Abs. Neutrophil	12.9 (H)	2.0 - 8.0 K/uL
Abs. Lymphocyte	0.8 (L)	1.0 - 5.1 K/uL
Abs. Monocyte	0.3	0.0 - 0.8 K/uL
Abs. Eosinophil	0.0	0.0 - 0.5 K/uL
Abs. Basophil	0.0	0.0 - 0.2 K/uL
-CBC WITH AUTOMATED		Def Denne
Result	Value	Ref Range
White Blood Cell Count	11.9 (H)	4.0 - 11.0 K/uL
Red Blood Cell Count	3.80 (L)	4.4 - 6.0 M/uL

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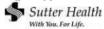
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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)				
ED Provider Notes by	MD at 03/06/17 1516 (continued)			
Hemoglobin	12.4 (L)	13.5 - 18.0 g/dL		
Hematocrit	36.7 (L)	40.0 - 52.0 %		
MCV	97	80.0 - 100.0 fL		
MCH	32.6	27.0 - 33.0 pg		
MCHC	33.8	31.0 - 36.0 g/dL		
RDW	13.3	<16.4 %		
Platelet Count	143 (L)	150 - 400 K/uL		
Differential Type	Automated			
Neutrophil %	90 (H)	49.0 - 74.0 %		
Lymphocyte %	9 (L)	26.0 - 46.0 %		
Monocyte %	1 (L)	2.0 - 12.0 %		
Eosinophil %	0	0.0 - 5.0 %		
Basophil %	0	0.0 - 2.0 %		
Abs. Neutrophil	10.7 (H)	2.0 - 8.0 K/uL		
Abs. Lymphocyte	1.0	1.0 - 5.1 K/uL		
Abs. Monocyte	0.1	0.0 - 0.8 K/uL		
Abs. Eosinophil	0.0	0.0 - 0.5 K/uL		
Abs. Basophil	0.0	0.0 - 0.2 K/uL		
-CBC WITH AUTOMATED	DIFFERENTIAL			
Result	Value	Ref Range		
White Blood Cell Count	10.0	4.0 - 11.0 K/uL		
Red Blood Cell Count	3.53 (L)	4.4 - 6.0 M/uL		
Hemoglobin	11.3 (L)	13.5 - 18.0 g/dL		
Hematocrit	33.6 (L)	40.0 - 52.0 %		
MCV	95	80.0 - 100.0 fL		
MCH	32.0	27.0 - 33.0 pg		
MCHC	33.6	31.0 - 36.0 g/dL		
RDW	13.6	<16.4 %		
Platelet Count	134 (L)	150 - 400 K/uL		
Differential Type	Automated	100 40011412		
Neutrophil %	87 (H)	49.0 - 74.0 %		
Lymphocyte %	11 (L)	26.0 - 46.0 %		
Monocyte %	2	2.0 - 12.0 %		
Eosinophil %	0	0.0 - 5.0 %		
Basophil %	0	0.0 - 2.0 %		
Abs. Neutrophil	8.7 (H)	2.0 - 8.0 K/uL		
Abs. Lymphocyte	1.1	1.0 - 5.1 K/uL		
Abs. Monocyte	0.2	0.0 - 0.8 K/uL		
Abs. Eosinophil	0.0	0.0 - 0.5 K/uL		
Abs. Basophil	0.0	0.0 - 0.3 KuL		
-PROTHROMBIN TIME/IN		0.0 - 0.2 IVUL		
Result	Value	Ref Range		
Prothrombin Time	22.2 (H)	11.5 - 15.1 sec		
INR	1.9 (H)	0.9 - 1.2		
-PARTIAL THROMBOPLA	* /	U.J - 1.E		
Result	Value	Ref Range		
PTT	35.0	24.5 - 36.0 sec		
		ET.0 - 00.0 300	_	
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Result

Value

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

ED Provider Notes by MD at 03/06/17 1516 (continued) PTT, Ratio -PARTIAL THROMBOPLASTIN TIME Result Value Ref Range PTT 50.3 (H) 24.5 - 36.0 sec PTT, Ratio -PROTHROMBIN TIME/INR Result Ref Range Value Prothrombin Time 18.4 (H) 11.5 - 15.1 sec INR 1.5 (H) 0.9 - 1.2 -FIBRINOGEN, CLOTTABLE Result Value Ref Range Fibrinogen 245 - 488 mg/dL 228 (L) -FIBRINOGEN, CLOTTABLE Result Value Ref Range Fibrinogen 245 - 488 mg/dL 251 -FIBRINOGEN, CLOTTABLE Result Value Ref Range Fibrinogen 212 (L) 245 - 488 mg/dL -PARTIAL THROMBOPLASTIN TIME Result **Ref Range** Value PTT 31.8 24.5 - 36.0 sec PTT, Ratio -PARTIAL THROMBOPLASTIN TIME Result Value Ref Range PTT 28.2 24.5 - 36.0 sec PTT, Ratio 0.9 -PROTHROMBIN TIME/INR **Ref Range** Result Value Prothrombin Time 11.5 - 15.1 sec 17.4 (H) 0.9 - 1.2 **INR** 1.4 (H) -PROTHROMBIN TIME/INR Result Value Ref Range Prothrombin Time 17.1 (H) 11.5 - 15.1 sec 0.9 - 1.2 INR 1.4 (H) -FIBRINOGEN, CLOTTABLE Result Ref Range Fibrinogen 245 - 488 mg/dL 237 (L) -PARTIĂL THROMBOPLASTIN TÎME Result Value Ref Range PTT 24.5 - 36.0 sec 27.7 PTT, Ratio PROTHROMBIN TIME/INR **Ref Range** Result Value 11.5 - 15.1 sec **Prothrombin Time** 17.2 (H) 1.4 (H) 0.9 - 1.2 -URINALYSIS & CULT IF INDICATED **Ref Range**

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4801-5 69 PC RESIST/OBSTRCT EXEC OFC

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SUTTER MEDICAL CENTER **SACRAMENTO** 2825 Capitol Ave Sacramento CA 95816 IP/OBS/SDS Legal Rec

HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

MD at 03/06/17 1516 (continued) ED Provider Notes by

Collection Type Unknown Urine Color Yellow Urine Appearance Hazy Urine Specific Gravity 1.008 Urine pH Urine Leukocyte Esterase 6.0 Neg **Urine Nitrites**

Neg 1+ (A) Urine Protein Urine Glucose Neg Urine Ketones 1+ (A) Urine Urobilinogen Normal Urine Bilirubin Neg Urine Blood Trace (A)

Urine culture not indicated, **Urine Comments** culture not performed.

-CULTURE, MRSA SCREEN

Result Value Special Requests None

No methicillin (oxacillin) resistant **CULTURE**

Staph aureus isolated

-GLUCOSE, POC

Value Result Glucose, POC 225 (H)

-URINALYSIS, MICROSCOPIC ONLY Result

Value Urine White Blood Cells Urine Red Blood Cells None seen Urine Spermatazoa

Ref Range

1.001 - 1.035

0.1 - 1.0 EU/dL

5.0 - 7.0

Neg

Neg Neg

Neg

Neg

Neg

Neg

Ref Range 70 - 100 mg/dL

Ref Range 0 - 5 /(hpf) 0 - 2/(hpf) /(hpf)

EKG Interpretation: Abnormal

Time: 15:17 Rhythm: NSR Rate: 6 P waves: normal

QRS: LVH

ST/T waves: nonspecific

Contemporary interpretation by ED physician.

ED PROGRESS NOTES:

3:12 PM Patient seen and examined. Orders reviewed. Unknown history. Brought in code 3, intubated, after being found down unresponsive. I confirmed appropriate placement of the ETT. Labs, CXR and EKG ordered.

3:21 PM Patient re-evaluated, he is becoming hypotensive and bradycardic. Pulse dropping into the 20s.

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POLICE

SACRAMENTO POLICE DEPARTMENT

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SUTTER MEDICAL CENTER SACRAMENTO 2825 Capitol Ave Sacramento CA 95816 IP/OBS/SDS Legal Rec HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

ED Provider Notes by MD at 03/06/17 1516 (continued)

3:23 PM Sodium bicarbonate IV, calcium gluconate IV and atropine IV given. CPR started.

3:24 PM CPR stopped and strong pulses regained.

3:30 PM Discussed my reasoning for ICU admission, pertinent labs, imaging as well as the clinical sittation with Dr. who will evaluate the patient.

3:37 PM Patient re-evaluated, pulses remain stable.

3:41 PM Cooling blanket placed on patient and pictures taken.

3:46 PM ABG reviewed, lactate noted at 22. Will order sodium bicarbonate IV.

3:49 PM Sodium bicarbonate IV (2 amps) given. Will start on bicarb drip.

4:08 PM ABG reviewed, lactate is 26 and pH is 6.6.

4:16 PM Bicarb drip started and bicarb IV (2 amps) given.

4:25 PM Reviewed the images of the CT C spine and CT brain, and the CXR. I removed the C Collar. Preparing to transport the patient to the ICU.

He is now showing some respiratory effort, and moving his extremities. Sedation is provided to maintain the lines and tubes so we can continue metabolic support.

THE FOLLOWING WAS ORDERED WHILE IN THE ED

Medications

NaCl 0.9% Inj FLUSH 2.5 mL (2.5 mL Intravenous Given 3/7/17 0820)

NaCl 0.9% Inj FLUSH 2.5 mL (not administered)

chlorhexidine (PERIDEX, PERIOGARD) Oral Soln 15 mL (15 mL Topical Oral Given 3/7/17 0900)

fentaNYL PF (SUBLIMAZE) Inj 25 mcg (not administered)

fentaNYL PF (SUBLIMAZE) Inj 50 mcg (50 mcg Intravenous Given 3/6/17 1701)

propofol (DIPRIVAN) Inj (30 mcg/kg/min × 90.7 kg Intravenous New Bag/Syringe 3/7/17 1718) norepinephrine (LEVOPHED) 8mg in D5W 250mL IV Drip (Non-Wt Based DOSING) (not

administered)

*Rx Communication - General Pharmacy Communication (not administered)

pneumococcal polyvalent (PNEUMOVAX-23) Vaccine 0.5 mL (Intramuscular Canceled Entry 3/8/17 0900)

influenza virus PF (FLUZONE/FLULAVAL/FLUARIX QUADRIVALENT) Vaccine Inj 0.5 mL (

Intramuscular Canceled Entry 3/8/17 0900)

famotidine (PEPCID) Inj 20 mg (20 mg Intravenous Given 3/7/17 0830)

fentaNYL PF (SUBLIMAZE) 2,500 mcg in NaCl 0.9% 250 mL IV Drip (150 mcg/hr Intravenous Rate Verify 3/7/17 1649)

albuterol 0.083% Neb Soln 2.5 mg (not administered)

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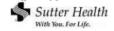
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HERNANDEZ, JOHN ANTHONY MRN:

DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

ED Provider Notes by MD at 03/06/17 1516 (continued) cisatracurium (NIMBEX) Inj 9.08 mg (not administered)

potassium chloride CR (KLOR-CON, K-DUR) Tab 20 mEq (not administered)

potassium chloride CR (KLOR-CON, K-DUR) Tab 40 mEq (not administered)

potassium chloride 10mEq in Sterile Water 100mL IVPB (premix) (not administered)

potassium chloride 10mEq in Sterile Water 100mL IVPB (premix) (10 mEq Intravenous New . Bag/Syringe 3/7/17 1033)

dextrose 5% 1,000 mL with sodium bicarbonate 150 mEq IV Soln (1 mL/kg/hr x 80 kg Intravenous New Bag/Syringe 3/7/17 1148)

meperidine (DEMEROL) Inj 25 mg (25 mg Intravenous Given 3/7/17 1129)

NaCl 0.9% (FOR BOLUS ONLY) IV Soln (2,721 mL Intravenous New Bag/Syringe 3/6/17 1521)

atropine Ini (1 mg Intravenous Given 3/6/17 1524)

sodium bicarbonate 8.4% Inj (50 mEq Intravenous Given 3/6/17 1523)

calcium gluconate Inj (1 g Intravenous Given 3/6/17 1524)

sodium bicarbonate 8.4% Inj 100 mEq (100 mEq Intravenous Given 3/6/17 1550)

dextrose 5% 1,000 mL with sodium bicarbonate 150 mEq IV Soln (Intravenous New Bag/Syringe 3/6/17 1616)

sodium bicarbonate 8.4% Ini 100 mEq (100 mEq Intravenous Given 3/6/17 1617) NaCl 0.9% IV Soln (2,000 mL Intravenous New Bag/Syringe 3/6/17 1700) calcium chloride Inj 1 g (1 g Intravenous Given 3/7/17 1614)

ED PROCEDURES:

Procedures (If Indicated)

MEDICAL DECISION MAKING:

RECORDS REVIEWED: triage & nursing notes, relevant outpatient, admission and ER notes on Epic. CURES when necessary and CareEverywhere when available and relevant.

MDM: My initial concern with this patient is that he appears to have suffered anoxic encephalopathic damage due to cardiac arrest. On arrival in the ER he has been intubated and is being manually ventilated. We find severe lactic acidosis. Although medics reported there was CPR at the scene, I do not have a specific timeline for these events. Admission to the ICU is arranged, and cooling measures for neuroprotective purposes is begun

DDX: cardiac arrest, anoxic encephalopathy, rhabdomyolysis, electrolyte disorder, tox disorder

CRITICAL CARE STATEMENT:

Critical care time was provided for 45 minutes, exclusive of separately reportable procedures. This was necessary to treat or prevent further deterioration of the following condition(s): respiratory failure, central nervous system failure or compromise, severe metabolic abnormality. Because of patient condition and risk of deterioration, my critical care time and attention to the patient's condition included, but was not limited to, one or more of the following: initial evaluation, chart data review, reviewing RN notes, reviewing old charts, documentation time, consultation and collaboration on findings or treatment, medication orders and management, transfer of care plans, vital signs assessments, repeated patient evaluations, ordering/interpreting/reviewing diagnostic studies, and obtaining necessary history and information pertaining to medical care from others.

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HERNANDEZ, JOHN ANTHONY MRN:

DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

ED Provider Notes (continued)

ED Provider Notes by MD at 03/06/17 1516 (continued)

DISPOSITION: admitted to the ICU.

CONDITION: critical

DISCHARGE PRESCRIPTIONS & INSTRUCTIONS:

There are no discharge medications for this patient.

Please see AVS for discharge followup details if the patient was discharged. All patients discharged are requested to contact their PCP within 2 days and inform them of their visit to the Emergency Department to follow-up.

ED DIAGNOSIS & IMPRESSION:

(I46.9) Cardiac arrest (HCC) (primary encounter diagnosis)

MD SIGNED: Department of Emergency Medicine Sutter Medical Center - Sacramento, CA

This document was transcribed by for Dr. MD

SIGNATURE & ATTESTATION: All medical record entries made by the scribe were at my direction. I have reviewed the chart and agree that the record accurately reflects my personal performance of the history, physical exam, medical decision making, and the emergency department course for this patient.

Signed: Dr. MD **Department of Emergency Medicine** Sutter Medical Center - Sacramento, CA

Signed by MD at 03/07/17 1739

ED Notes

ED Triage RN Note by at 03/06/17 1515

Service: Emergency Date of Service: 03/06/17 1515

Author Type: Registered Nurse Status: Signed

Pt was in the clinic, causing a disturbance, PD on scene, tazed pt. Pt became unresponsive. Pt was down approx 1-10 mins before EMS arrived on scene. Pt was pulseless and given epi x 2, regained pulses and transported.

Signed by at 03/06/17 1516

ED Supplemental Provider Note by MD at 03/06/17 1515

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SUTTER MEDICAL CENTER SACRAMENTO 2825 Capitol Ave Sacramento CA 95816 IP/OBS/SDS Legal Rec HERNANDEZ, JOHN ANTHONY MRN:

DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED Notes (continued)

ED Supplemental Provider Note by MD at 03/06/17 1515 (continued)

Author MD Service: Emergency

Filed: 03/06/171516

Editor: MD (Physician)

Author Type: Physicia Status: Signed

EMERGENCY MEDICINE LIMITED BEDSIDE ULTRASOUND REPORT

Sutter Medical Center - Sacramento

Point of Care Emergency Department Limited CARDIAC Ultrasound

INDICATIONS: chest pain or dyspnea

PROCEDURE: Using a phased array transducer, I performed cardiac imaging using parasternal long and apical windows. Imaging showed the absence of a clinically significant pericardial effusion and global left ventricular function was preserved but hypokinetic. The inferior vena cava was interrogated in the right parasagittal plane and there was more than 50% collapse of the IVC with respiratory inspiration.

IMPRESSION: Point of care limited bedside echocardiography with the absence of pericardial effusion and preserved global left ventricular function in hypokinetic heart. These images were archived and I independently interpreted the images at the bedside.

SIGNED: MD

Department of Emergency Medicine

Sutter Medical Center - Sacramento, CA

Signed by MD at 03/06/17 1516

ED Notes by at 03/06/17 1540

iled: 03/06/17 1551 Editor: (Registered Nurse) Service: Emergency Date of Service: 03/06/17 1540 Author Type: Registered Nurse Status: Signed

Page 27

Hypothermia protocol started.

Signed by at 03/06/17 1551

ED Vitals ED Vitals Date and Time 03/06/17 1551 BP 125/47 Temp 98.1 °F (36.7 °C) (!) 135 03/06/17 1543 (!) 126 22 95 % SA 03/06/17 1530 100 % 03/06/17 1529 (!) 100.6 °F (38.1 °C) (!) 125 27 99/43 100 % 25 (!) 110/31 97 %

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ED Vitals	(continued)
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ED Vitals (continued)							
Date and Time	Temp	Pulse	Resp	BP	SpO2	Weight	Who
03/06/17 1518			_	(!) 70/26	_	_	SA
03/06/17 1516		64	16	(!) 140/104	92 %	90.7 kg (200 lb)	SA

ED Disposition

ED	Dis	pos	ition	
	ED	Dien	neitin	

ED Diagnoses

ED Diagnoses

Cardiac arrest (HCC)

ED Medications

Historical Medications Entered This Encounter

This print group is not available in inpatient encounters. Please contact a system administrator.

Allergies

Allergy History as of 03/08/17

No Allergies on File

Problem List

Problem List			
Problem	Entered	Chronic	
Cardiac arrest (HCC)	3/6/2017 by MD		
Acute renal failure (ARF) (HCC)	3/7/2017 by	MD	
Methamphetamine abuse	3/7/2017 by	MD	
Rhabdomyolysis	3/7/2017 by	MD	

Cancer Staging Summary for Hernandez, John Anthony

History and Physical

H&P by MD at 03/06/17 1610 MD Service: ICU Date of Service: 03/06/17 1610 Author Type: Resident (RSS) Status: Attested Addendum Author: Filed: 03/06/17 1700 MD (Resident (RSS)) Original Note by MD at 03/06/17 2119 MD at 03/06/17 2119 MD (Resident (RSS)) filed at 03/06/17 1656 Agree with the assessment and plan of Dr

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

History and Physical (continued)

H&P by

MD at 03/06/17 1610 (continued)



Sutter Medical Center - Sacramento (SMCS)

RESIDENT PHYSICIAN - ICU HISTORY AND PHYSICAL

PATIENT ID: John Anthony Hernandez

MRN:

PCP: No primary care provider on file.

ADMISSION TIME AND DATE: 3/6/2017 3:14 PM RESIDENT PHYSICIAN: ATTENDING PHYSICIAN: Dr CHIEF COMPLAINT: Unresponsive

HISTORY OF PRESENT ILLNESS

SOURCE OF INFORMATION:

History is obtained from paramedics and police. Patient was referred by emergency department.

HISTORY OF PRESENT ILLNESS:

John Anthony Hernandez is a 34 year old male with a history of unknown who presents with cardiac arrest after being tased by the police.

Police report that the patient appears acutely intoxicated and was combative so he was tased. He was down approximately 10 min before regaining pulses. During that time he received CPR and epi x2.

In the ER patient was bradycardic to the 20s. Sodium bicarb, calcium gluconate and atropine given. Pulse back in the 100s. Hypothermia protocol was initiated.

ED COURSE:

3:12 PM Patient seen and examined. Orders reviewed. Unknown history. Brought in code 3, intubated, after being found down unresponsive. Labs, CXR and EKG ordered.

3:21 PM Patient re-evaluated, he is becoming bradycardic. Pulse dropping into the 20s.

3:23 PM Sodium bicarbonate IV, calcium gluconate IV and atropine IV given. CPR started.

3:24 PM CPR stopped and strong pulses regained.

3:30 PM Discussed my reasoning for ICU admission, pertinent labs, imaging as well as the clinical siutation with Dr. Yee who will evaluate the patient.

3:37 PM Patient re-evaluated, pulses remain stable.

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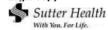
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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

History and Physical (continued)

H&P by

MD at 03/06/17 1610 (continued)

3:41 PM Cooling blanket placed on patient and pictures taken.

3:46 PM ABG reviewed, lactate noted at 22. Will give sodium bicarbonate.

3:49 PM Sodium bicarbonate IV (2 amps) given.



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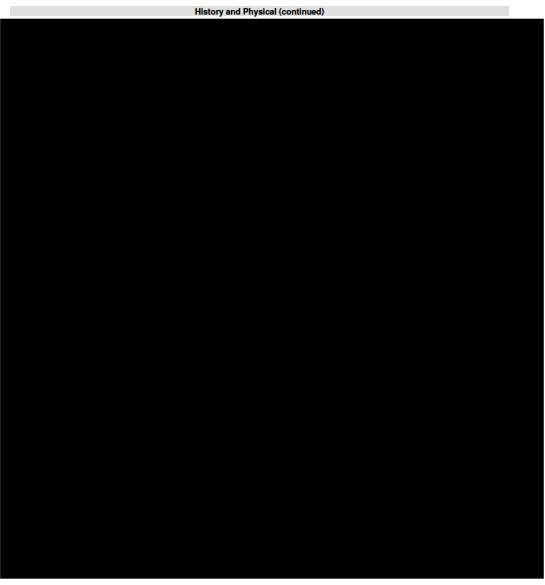
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Adm: 3/6/2017, D/C:



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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:



ASSESSMENT AND PLAN

John Anthony Hernandez is a 34 year old male with a history of unknown who presents with cardiac arrest after being tased by the police admitted for cardiac arrest.

Active Problems:

Cardiac arrest (HCC)

NEUROLOGICAL

Pupils are non-reactive, possible anoxic brain injury given down time.

- 24hrs of hypothermia
- neuro consult

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POLICE

SACRAMENTO POLICE DEPARTMENT

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SUTTER MEDICAL CENTER SACRAMENTO 2825 Capitol Ave Sacramento CA 95816 IP/OBS/SDS Legal Rec HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983. Sex: M

DOB: 2/10/1983, Sex: N Adm: 3/6/2017, D/C:

History and Physical (continued)

MD at 03/06/17 1610 (continued)

CARDIOVASCULAR

Currently sinus tachycardia with vss.

cardiac consult

PULMONARY

No spontaneous respirations. Intubated and sedated.

- continue vent per protocol with sedation

RENAL

Foley in place.

- monitor urine output

FLUIDS, ELECTROLYTES, NUTRITION (FEN)

- bicarb drip

GASTROINTESTINAL

Diet: NPO Start Now

PSYCHIATRIC

Initial elevated rectal temperature likely related to acute intoxication. Now sedated.

- u tox

PROPHYLAXIS

GI PPx: famotidine DVT PPx: lovenox

Code Status: Full code CPR

In the event of cardiac, pulmonary, or cardiopulmonary arrest, any and all therapy may be initiated. Complete recovery is the outcome goal.

Emergency Contact: unknown

Greater than 75 minutes were spent on the evaluation and admission of this patient. >50% face to face with patient and family providing counseling on diagnosis, answering questions, and discussing treatment plan.

The case was discussed and patient seen with Dr , MD 3/6/2017 4:11 PM

Signed by MD at 03/06/17 1656 Signed by MD at 03/06/17 1700 Signed by MD at 03/06/17 2119

Consult

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Consults (continued)

Consults signed by

MD at 03/06/17 2119

Pulmonary Medicine Date of Service: 03/06/17 1659

Location: Sutter Medical Center Sacramento

MD (Physician)

PATIENT: HERNANDEZ, JOHN A

MRN: Account: DOB:

Visit Start Date: 03/06/2017 Service Date: 03/06/2017 Author:

Consultation

REPORT TITLE: Critical Care Evaluation and Attention Time.

CHIEF COMPLAINT:

- 1. Altered mental status with hyperactive belligerent behavior secondary to methamphetamine.
- 2. Status post pacer episode with secondary cardiac arrest.
- 3. Hypothermia following successful resuscitation.

HISTORY OF PRESENT ILLNESS: The patient is a 34-year-old male with unknown past history who apparently was behaving belligerently and combative in the field. The patient was approached by police officers who were required to use a Taser to subdued him and upon being tasered, the patient developed an acute cardiac arrest. The patient underwent CPR in the field receiving epinephrine and was Intubated prior on arrival by EMS. The patient was brought to the Emergency Room where he went into PEA, required some additional CPR with return of a blood pressure. He is now admitted to the Intensive Care Unit intubated and sedated.

PAST MEDICAL HISTORY: Unknown.

CURRENT PHYSICAL EXAMINATION:

VITAL SIGNS: Reveals a temperature of 100.6, heart rate is 120, respirations are 24, blood pressure is 140/100.

GENERAL: The patient is a well-developed, tattooed white male who is

intubated and sedated. SKIN: Warm and dry.

HEAD AND NECK: Normocephalic. Pupils are equal and reactive. Sclerae is anicteric. Nasal oral mucosa are normal.

NECK: Supple, without adenopathy.

CHEST: Clear to auscultation and normal to percussion.

CARDIAC: Reveals a regular rhythm with normal S1, S2, without murmurs or

gallops.

ABDOMEN: Soft and nontender. Bowel tones are present. Liver and spleen are

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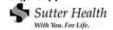
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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

Adm: 3/6/2017, D/C:

Consults (continued)

Consults signed by MD at 03/06/ not palpable. No additional masses. MD at 03/06/17 2119 (continued)

EXTREMITIES: Without evidence for cyanosis, clubbing or edema. NEUROLOGIC: The patient does not respond to voice. He has nonpurposeful

movements of all extremities, however.

CT scan of the head and neck were benign. X-ray of the chest showed good ET position.

The hemoglobin is 11.6. INR of 1.9. Sodium is 142, potassium 4.8, CO2 8, glucose 222, BUN 20, creatinine 2.03. The calcium is 10.3, magnesium 3.0, bilirubin 99, alkaline phosphatase 72, AST 195, ALT 91. TSH was 5.27. Initial blood gas, pH 7.66 with a CO2 56, O2 76, bicarb 6.5. Ionized calcium of 1.17.

IMPRESSION: Taser-induced cardiac arrest. The patient currently is metabolic and respiratory acidosis, but currently hemodynamically stable. The patient will placed on hypothermia therapy and vent support.

DD: 03/06/2017 16:59:41; DT: 03/06/2017 19:09:01; ; D# 7499300ES; C# 1069345

MD at 03/06/17 2119

Consults by at 03/06/17 2315

(Others)

Service: Organ Procurement Date of Service: 03/06/17 2315

Author Type: Others Status: Signed



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REQUESTED

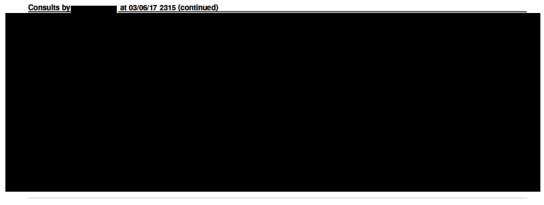
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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

Adm: 3/6/2017, D/C:

Consults (continued)



General Script Information

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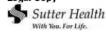
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DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

ALL ORDERS AND RESULTS



The orders printed below will display the cosigner if there is one. If the order has not yet been cosigned and requires cosignature, then the order will have a status of "cosignature pending." If the order does not require cosignature, it will not display this status.

Order		(Order
All O	rders Excluded	
IEMODIALYSIS INPATIENT		
Electronically signed by:, MD on 03/08/17 1143 Ordering user:MD 03/08/17 1143	Ordering provider: MD	Status: Activ
HEMODIALYSIS INPATIENT		
Electronically signed by: MD on 03/08/17 1143 Ordering user: , MID 03/08/17 1143	Ordering provider:	Status: Acth
/ITAL AF 1.2 - CONTINUOUS		
Electronically signed by: MD on 03/08/17 1021 Ordering user: MD 03/08/17 1021	Ordering provider:	Status: Acth
/ITAL AF 1.2 - CONTINUOUS		
Electronically signed by: MD on 03/08/17 1021 Ordering user: MD 03/08/17 1021	Ordering provider: MD	Status: Activ
IURSING COMMUNICATION		
Electronically signed by: MD on 03/08/17 0815 Ordering user: MD 03/08/17 0815	Ordering provider: MD	Status: Acti
RESTRAINTS FOR NON-VIOLENT, NON-SELF DESTRUCTIVE BEH	AVIORS - DAILY	
Electronically signed by: MD on 03/08/17 0815 Ordering user: MD 03/08/17 0815	Ordering provider: MD	Status: Acti
IURSING COMMUNICATION		
Electronically signed by: MD on 03/08/17 0815 Ordering user: MD 03/08/17 0815	Ordering provider:	Status: Acti
ESTRAINTS FOR NON-VIOLENT, NON-SELF DESTRUCTIVE BEH	AVIORS - DAILY	
Electronically signed by: MD on 03/08/17 0815 Ordering user: MD 03/08/17 0815	Ordering provider:	Status: Activ
ONSULT TO SOCIAL SERVICES		
Electronically signed by: on 03/08/17 0605 Ordering user: 03/08/17 0605	Ordering provider: MD	Status: Complete
CONSULT TO SOCIAL SERVICES		
Electronically signed by: on 03/08/17 0605 Ordering user: 03/08/17 0605	Ordering provider:	Status: Complete
CONTINUE CENTRAL LINE		
D' - II		-
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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

Adm: 3/6/2017, D/C:

IP/OBS/SDS L	egai Hec	
	Excluded (continued)	
CONTINUE CENTRAL LINE (continued)		
Electronically signed by: MD on 03/07/17 1626 Ordering user: MD 03/07/17 1626	Ordering provider:	Status: Active
CONTINUE CENTRAL LINE		
Electronically signed by: MD on 03/07/17 1626 Ordering user: MD 03/07/17 1626	Ordering provider:	Status: Active
MONITOR CENTRAL VENOUS PRESSURE		
Electronically signed by: MD on 03/07/17 1119 Ordering user: MD 03/07/17 1119	Ordering provider:	Status: Activ
MONITOR CENTRAL VENOUS PRESSURE		
Electronically signed by: MD on 03/07/17 1119 Ordering user: MD 03/07/17 1119	Ordering provider:	Status: Active
VITAL SIGNS		
Electronically signed by: MD on 03/07/17 1118 Ordering user: MD 03/07/17 1118	Ordering provider:	Status: Active
MONITOR TEMPERATURE		
Electronically signed by: MD on 03/07/17 1118 Ordering user: MD 03/07/17 1118	Ordering provider:	Status: Active
NURSING COMMUNICATION		
Electronically signed by: MD on 03/07/17 1118 Ordering user: MD 03/07/17 1118	Ordering provider:	Status: Activ
VITAL SIGNS		
Electronically signed by: MD on 03/07/17 1118 Ordering user: MD 03/07/17 1118	Ordering provider:	Status: Activ
MONITOR TEMPERATURE		
Electronically signed by: MD on 03/07/17 1118 Ordering user: MD 03/07/17 1118	Ordering provider:	Status: Activ
NURSING COMMUNICATION		
Electronically signed by: MD on 03/07/17 1118 Ordering user: MD 03/07/17 1118	Ordering provider:	Status: Activ
RESTRAINTS FOR NON-VIOLENT, NON-SELF DESTRUCTIVE BE	HAVIORS - DAILY	
Electronically signed by: MD on 03/07/17 0813 Ordering user: MD 03/07/17 0813	Ordering provider:	Status: Activ
RESTRAINTS FOR NON-VIOLENT, NON-SELF DESTRUCTIVE BE	HAVIORS - DAILY	
Electronically signed by: MD on 03/07/17 0813 Ordering user: 03/07/17 0813	Ordering provider:	Status: Activ
CONSULT TO SOCIAL SERVICES		
Electronically signed by: on 03/07/17 0444 Ordering user: US/07/17 0444	Ordering provider:	Status: Complete
CONSULT TO SOCIAL SERVICES		
Electronically signed by: on 03/07/17 0444 Ordering user: 03/07/17 0444	Ordering provider:	Status: Complete
APPLY SEQUENTIAL COMPRESSION DEVICE		
Electronically signed by: , NP on 03/07/17 0704		Status: Active
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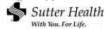
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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

Adm: 3/6/2017, D/C:

IP/OBS/SDS Legal Hec			
All Orders	Excluded (continued)		
APPLY SEQUENTIAL COMPRESSION DEVICE (continued)			
Mode: Ordering in Verbal mode Ordering user: 03/07/17 0427	Communicated by: Ordering provider:	NP	
Growing user.	Ordering provider.	IN	
APPLY SEQUENTIAL COMPRESSION DEVICE			
Electronically signed by: , NP on 03/07/17 0704 Mode: Ordering in Verbal mode	Communicated by:		Status: Acth
Ordering user: 03/07/17 0427	Ordering provider:	, NP	
HIDONIA COMPUNICATION			
IURSING COMMUNICATION			Olehen And
Electronically signed by: NP on 03/07/17 0206 Ordering user: , NP 03/07/17 0206	Ordering provider:	, NP	Status: Acti
NURSING COMMUNICATION Electronically signed by:, NP on 03/07/17 0206			Status: Activ
Electronically signed by: , NP on 03/07/17 0206 Ordering user: , NP 03/07/17 0206	Ordering provider:	, NP	Status. Acti
NURSING COMMUNICATION			
			Cintury Dinasations
Electronically signed by: NP 03/07/17 0054 Ordering user: NP 03/07/17 0054	Ordering provider:	NP	Status: Discontinue
Discontinued by: PharmD 03/08/17 1209			
NOTIFY			
Electronically signed by: NP on 03/07/17 0054			Status: Discontinue
Ordering user: , NP 03/07/17 0054	Ordering provider:	, NP	
Discontinued by: PharmD 03/08/17 1209			
NURSING COMMUNICATION			
Electronically signed by: , NP on 03/07/17 0054 Ordering user: , NP 03/07/17 0054	Orderina	ND	Status: Discontinue
Ordering user: , NP 03/07/17 0054 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	, NP	
•			
NOTIFY			
Electronically signed by: , NP on 03/07/17 0054 Ordering user: , NP 03/07/17 0054	Ordering provider:	NP	Status: Discontinue
Discontinued by: PharmD 03/08/17 1209		,	
NCEDT DECTAL TUDE			
NSERT RECTAL TUBE Electronically signed by:, NP on 03/07/17 0109			Status: Complete
Mode: Ordering in Telephone mode	Communicated by:		Status. Complete
Ordering user: 03/06/17 2310	Ordering provider:	NP	
NSERT RECTAL TUBE			
Electronically signed by: , NP on 03/07/17 0109 Mode: Ordering in Telephone mode			Status: Complete
Mode: Ordering in Telephone mode	Communicated by:	. NP	
Ordering user: 03/06/17 2310	Ordering provider:	, NP	
NURSING COMMUNICATION			
Electronically signed by: MD on 03/07/17 0743	0		Status: Acti
Mode: Ordering in Verbal mode Ordering user: 03/06/17 2246	Communicated by: Ordering provider:	MD	
NURSING COMMUNICATION			
Electronically signed by: MD on 03/07/17 0743 Mode: Ordering in Verbal mode	Communicated by:		Status: Acti
Ordering user: 03/06/17 2246	Ordering provider:	MD	
/ENTILATOR ORDERS, ADULT			
Electronically signed by: MD on 03/06/17 2129			Status: Acti
			_
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Adm: 3/6/2017, D/C:

All Orders I	Excluded (continued)		
ENTILATOR ORDERS, ADULT (continued)			
Ordering user: MD 03/06/17 2129	Ordering provider:	MD	
ENTILATOR ORDERS, ADULT			
Electronically signed by: MD on 03/06/17 2129 Ordering user: MD 03/06/17 2129	Ordering provider:	MD	Status: Activ
RESTRAINTS FOR NON-VIOLENT, NON-SELF DESTRUCTIVE BEH	AVIORS - DAILY		
Electronically signed by: MD on 03/06/17 1842 Ordering user: MD 03/06/17 1842	Ordering provider:	MD	Status: Activ
RESTRAINTS FOR NON-VIOLENT, NON-SELF DESTRUCTIVE BEH	AVIORS - DAILY		
Electronically signed by: MD on 03/06/17 1842 Ordering user: MD 03/06/17 1842	Ordering provider:	MD	Status: Acti
IURSING COMMUNICATION			
Electronically signed by: MD 03/06/17 1815 Ordering user: MD 03/06/17 1815	Ordering provider:	MD MD	Status: Activ
IURSING COMMUNICATION			
Electronically signed by: MD on 03/06/17 1815 Ordering user: MD 03/06/17 1815	Ordering provider:	MD	Status: Acti
NSERT ARTERIAL LINE			
Electronically signed by: MD on 03/06/17 2116 Mode: Ordering in Verbal mode	Communicated by:		Status: Acti
Ordering user: 03/06/17 1709	Ordering provider:	MD	
NSERT ARTERIAL LINE			
Electronically signed by: MD on 03/06/17 2116	Oitt		Status: Acti
Mode: Ordering in Verbal mode Ordering user: 03/06/17 1709	Communicated by: Ordering provider:	MD	
ENTILATOR ORDERS, ADULT			
Electronically signed by: MD on 03/06/17 1641	Orderina consisten		Status: Discontinue
Ordering user: MD 03/06/17 1641 Discontinued by: MD 03/06/17 2129	Ordering provider:	MD	
IURSING COMMUNICATION			
Electronically signed by: MD on 03/06/17 1641			Status: Acti
Ordering user: MD 03/06/17 1641	Ordering provider:	MD	
RESPIRATORY PATIENT ASSESSMENT			
Electronically signed by: MD on 03/06/17 1641	Orderina associdase	MD	Status: Discontinue
Ordering user: MD 03/06/17 1641 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	
TTAL SIGNS			
Electronically signed by: MD on 03/06/17 1641			Status: Acti
Ordering user: MID 03/06/17 1641	Ordering provider:	MD	
PULSE OXIMETRY			
Electronically signed by: MD on 03/06/17 1641	Outring		Status: Acti
Ordering user: MD 03/06/17 1641	Ordering provider:	MD	
NTAKE AND OUTPUT			
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Acti
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DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

All Orders Excluded (continued)				
NTAKE AND OUTPUT (continued)				
NOTIFY PROVIDER FOR VITAL SIGN PARAMETERS				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
OXYGEN ADMINISTRATION - ADULT				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
NPO				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MID 03/06/17 1641	Ordering provider:	MD	Status: Activ	
VITAL SIGNS				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
MONITOR TEMPERATURE				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
NURSING COMMUNICATION				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641 Additional signing events:	Ordering provider:	MD	Status: Discontinue	
MD 03/07/17 0743, for Discontinuing in Verbal mode, Communica Discontinued by: 03/06/17 2246	ator -			
ASSESS				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
NURSING COMMUNICATION				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
MONITOR				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
NOTIFY				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
NOTIFY				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
NOTIFY				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
COLD THERAPY				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
COLD THERAPY				
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DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

All Orders	Excluded (continued)		
COLD THERAPY (continued)			
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ
COLD THERAPY			
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD U3/06/17 1641	Ordering provider:	MD	Status: Activ
WARM THERAPY			
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ
NURSING COMMUNICATION			
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ
NURSING COMMUNICATION			
Electronically signed by: MD on 03/06/17 1641 Ordering user: MID 03/06/17 1641	Ordering provider:	MD	Status: Activ
JRINARY CATHETER MANAGEMENT			
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Acti
BEDREST			
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Acti
RT COMMUNICATION			
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Acti
IURSING COMMUNICATION			
Electronically signed by: MD 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Acti
IOTIFY			
Electronically signed by: MD on 03/06/17 1641 Ordering user: MID 03/06/17 1641	Ordering provider:	MD	Status: Acti
IOTIFY			
Electronically signed by: MD 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Acti
IOTIFY			
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Acti
LEVATE HOB			
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Acti
RANGE OF MOTION			
Electronically signed by: MD on 03/06/17 1641 Ordering user: MID 03/06/17 1641	Ordering provider:	MD	Status: Acti
CAM-ICU ASSESSMENT (ABCDE)			
Electronically signed by: MD on 03/06/17 1641			Status: Acti
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Adm: 3/6/2017, D/C:

Ordering provider:	150	
Ordering provider:		
	MD	
0.1.1		Status: Ac
Ordering provider:	MD	
Ordering provides:	MD	Status: Ac
Ordering provider.	ML	
Ordering provider:	MD	Status: Ac
Ordering provider.	WID	
Ordering provider:	MD	Status: Ac
ordering provider:		
Ordering provider:	MD	Status: Ac
Ordering provider:	MD	Status: Ac
-		
Ordering provider:	MD	Status: Ac
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Ordering provider:	MD	Status: Discontin
ator -		
		Status: Ac
Ordering provider:	MD	Otatao.
		Status: Ac
Ordering provider:	MD	
		Status: Ac
Ordering provider:	MD	
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Ordering provider:	MD	
		Status: Ac
Ordering provider:	MD	
	Ordering provider: Ordering provider: Ordering provider: Ordering provider:	Ordering provider: MD Ordering provider: MD

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GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

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All Orders Excluded (continued) VENTILATOR ORDERS, ADULT Electronically signed by: MD on 03/06/17 1641
Ordering user: MD 03/06/17 1641
Discontinued by: MD 03/06/17 2129 Status: Discontinued MD NURSING COMMUNICATION Electronically signed by: MD on 03/06/17 1641
Ordering user: MD 03/06/17 1641 Status: Active Ordering provider: MD RESPIRATORY PATIENT ASSESSMENT MD on 03/06/17 1641 MD 03/06/17 1641 PharmD 03/08/17 1209 Electronically signed by: Status: Discontinued Ordering provider: Ordering user: Discontinued by: VITAL SIGNS Electronically signed by: MD on 03/06/17 1641
Ordering user: MD 03/06/17 1641 Status: Active Ordering provider: MD NURSING COMMUNICATION Electronically signed by: Ordering user: MD on 03/06/17 1641 MD 03/06/17 1641 Status: Active Ordering provider: MD on 03/06/17 1641 MD 03/06/17 1641 Electronically signed by: Ordering user: Status: Active Ordering provider: MD NOTIFY Electronically signed by: Ordering user: MD on 03/06/17 1641 MD 03/06/17 1641 Status: Active Ordering provider: MD NOTIFY Electronically signed by: Ordering user: MD on 03/06/17 1641 D 03/06/17 1641 Status: Active Ordering provider: NURSING COMMUNICATION Electronically signed by: MD on 03/06/17 1641
Ordering user: MD 03/06/17 1641 Status: Active Ordering provider: NURSING COMMUNICATION Electronically signed by: MD on 03/06/17 1641
Ordering user: MD 03/06/17 1641 Status: Activo Ordering provider: MD ORAL CARE Electronically signed by: Ordering user: MD on 03/06/17 1641 06/17 1641 Status: Active Ordering provider: MD NURSING COMMUNICATION Electronically signed by: Ordering user: Status: Active MD on 03/06/17 1641 MD 03/06/17 1641 Ordering provider: NURSING COMMUNICATION Electronically signed by: Ordering user: Status: Active MD on 03/06/17 1641 Ordering provider: NURSE SWALLOW SCREEN Electronically signed by: Ordering user: Status: Activo MD on 03/06/17 1641 MD 03/06/17 1641 Ordering provider: MD Printed by at 3/8/17 12:16 PM Page 44

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GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

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DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

	Excluded (continued)	
PT EVALUATE AND TREAT		
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	Status: Acth
PULSE OXIMETRY		
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD Status: Activ
NOTIFY PROVIDER FOR VITAL SIGN PARAMETERS Electronically signed by: MD on 03/06/17 1641		Status: Acti
Ordering user: MD 03/06/17 1641	Ordering provider:	MD
DXYGEN ADMINISTRATION - ADULT		
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	Status: Actividad
NPO		
Electronically signed by: MD on 03/06/17 1641		Status: Activ
Ordering user: MD 03/06/17 1641	Ordering provider:	MD
MONITOR TEMPERATURE		
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	Status: Acti
MONITOR		
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	Status: Acti
	Ordering provider.	
Electronically signed by: MD on 03/06/17 1641		Status: Activ
Ordering user: MD 03/06/17 1641	Ordering provider:	MD Status. Acti
COLD THERAPY		
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	Status: Activ
COLD THERAPY		
Electronically signed by: MD on 03/06/17 1641		Status: Acti
Ordering user: MD 03/06/17 1641	Ordering provider:	MD
NURSING COMMUNICATION		
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	Status: Acti
BEDREST		
Electronically signed by: MD on 03/06/17 1641	Ordorina providor	Status: Activ
Ordering user: MD 03/06/17 1641	Ordering provider:	MD
NOTIFY Electronically signed by: MD on 03/06/17 1641		Status: Activ
Ordering user: MID 03/05/17 1641	Ordering provider:	MD Status. Add
NOTIFY		
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	Status: Activ
NOTIFY	-,	
Electronically signed by: MD on 03/06/17 1641		Status: Acti

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DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

All Orders Excluded (continued)				
NOTIFY (continued)				
Ordering user: MD 03/06/17 1641	Ordering provider:	MD		
ELEVATE HOB				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
CAM-ICU ASSESSMENT (ABCDE)				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
NURSING COMMUNICATION				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
EARLY MOBILITY				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
INTAKE AND OUTPUT				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
ASSESS				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Activ	
ARTERIAL BLOOD GAS				
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518	Ordering provider:	MD	Status: Complete	
ARTERIAL BLOOD GAS				
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518	Ordering provider:	MD	Status: Complete	
FULL TREATMENT IN ARREST SITUATIONS				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641 Code status: FULL	Ordering provider:	MD	Status: Activ	
ADMIT TO INPATIENT (FROM HOSPITAL)				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Complete	
ADMIT TO INPATIENT (FROM HOSPITAL)				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641	Ordering provider:	MD	Status: Complete	
FULL TREATMENT IN ARREST SITUATIONS				
Electronically signed by: MD on 03/06/17 1641 Ordering user: MD 03/06/17 1641 Code status: FULL	Ordering provider:	MD	Status: Activ	
NURSING COMMUNICATION				
Electronically signed by: MD on 03/06/17 1610 Ordering user: MD 03/06/17 1610	Ordering provider:	MD	Status: Activ	
NURSING COMMUNICATION				
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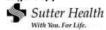
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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

All Orders	Excluded (continued)		
NURSING COMMUNICATION (continued)	,		
Electronically signed by: MD on 03/06/17 1610 Ordering user: MU 03/06/17 1610	Ordering provider:	MD	Status: Acth
BED REQUEST			
Electronically signed by: MD on 03/06/17 1544 Ordering user: MD 03/06/17 1544	Ordering provider:	MD	Status: Complete
BED REQUEST			
Electronically signed by: MD on 03/06/17 1544 Ordering user: MD 03/06/17 1544	Ordering provider:	MD	Status: Complete
JRINARY CATHETER MANAGEMENT			
Electronically signed by: MD on 03/06/17 1520 Ordering user: MD 03/06/17 1520	Ordering provider:	MD	Status: Acth
JRINARY CATHETER MANAGEMENT			
Electronically signed by: MD on 03/06/17 1520 Ordering user: MD 03/06/17 1520	Ordering provider:	MD	Status: Acti
IOTIFY			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MU 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinue
IOTIFY			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinue
· ———			
NOTIFY Electronically signed by: MD on 03/06/17 1518			Status: Discontinue
Ordering user: MD 03/08/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Otatus. Discontinu
ELEVATE HOB			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinue
RANGE OF MOTION			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/05/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinue
CAM-ICU ASSESSMENT (ABCDE)			
MD on 03/06/17 1518 Ordering user: MD on 03/06/17 1518 Ordering user: MD 03/08/17 1518 PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinue
Flectronically signed by: MD on 03/06/17 1518			Status: Discontinue
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status. Discontinue
IURSING COMMUNICATION			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinue
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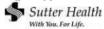
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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

IP/OB3/3D3 Le	-		
	Excluded (continued)		
NURSING COMMUNICATION (continued)			
NURSING COMMUNICATION			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinued
NURSE SWALLOW SCREEN			
MD on 03/06/17 1518	Ordering provider:	MD	Status: Discontinued
EARLY MOBILITY			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/05/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinued
PT EVALUATE AND TREAT			
Electronically signed by: MD on 03/06/17 1518 Ordering user. MD 03/06/17 1518 Discontinued by: MD 03/06/17 1659	Ordering provider:	MD	Status: Discontinued
VENTILATOR ORDERS, ADULT			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518 Discontinued by: MD 03/06/17 2129	Ordering provider:	MD	Status: Discontinued
NURSING COMMUNICATION			
MD on 03/06/17 1518	Ordering provider:	MD	Status: Discontinued
ARTERIAL BLOOD GAS Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518	Ordering provider:	MD	Status: Completed
ARTERIAL BLOOD GAS			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518	Ordering provider:	MD	Status: Completed
NOTIFY Floctronically signed by: MD on 03/06/17 1518			Status: Discontinued
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinued
NOTIFY			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MU 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinued
NOTIFY			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/08/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinued
ELEVATE HOB			
MD on 03/06/17 1518	Ordering provider:	MD	Status: Discontinued
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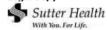
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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

Adm: 3/6/2017, D/C:

All Orders	Excluded (continued)		
LEVATE HOB (continued)			
ANGE OF MOTION			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinu
RAL CARE			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MU 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinu
AM-ICU ASSESSMENT (ABCDE)			
Electronically signed by: MD on 03/06/17 1518 Ordering user. MD 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinu
URSING COMMUNICATION			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinu
URSING COMMUNICATION			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MU 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinu
URSING COMMUNICATION			
Section Sect	Ordering provider:	MD	Status: Discontinu
See SWALLOW SCREEN	Ordering provider:	MD	Status: Discontinu
ARLY MOBILITY			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinu
FEVALUATE AND TREAT			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518 Discontinued by: MD 03/06/17 1589	Ordering provider:	MD	Status: Discontinu
ENTILATOR ORDERS, ADULT			
Electronically signed by: MD on 03/06/17 1518 Ordering user. MD 03/06/17 1518 Discontinued by: MD 03/06/17 2129	Ordering provider:	MD	Status: Discontinu
URSING COMMUNICATION			
Electronically signed by: MD on 03/06/17 1518 Ordering user: MD 03/06/17 1518 Discontinued by: PharmD 03/08/17 1209	Ordering provider:	MD	Status: Discontinu
ARDIAC MONITORING			
			Status: Acti

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

All Orders Excluded (continued)				
ARDIAC MONITORING (continued) Ordering user: MD 03/06/	17 1515	Ordering provider:	MD	
-	17 1313	Orderling provider.	MD	
ULSE OXIMETRY				
Electronically signed by: Ordering user: MD 03/06/	MD on 03/06/17 1515 17 1515	Ordering provider:	MD	Status: Acti
ALINE LOCK IV				
Electronically signed by: Ordering user: MD 03/06/	MD on 03/06/17 1515 17 1515	Ordering provider:	MD	Status: Act
RAW RAINBOW TUBE AND HOLD FOR FUT	URE ORDERS			
Electronically signed by: Ordering user: MD 03/06/	MD on 03/06/17 1515 17 1515	Ordering provider:	MD	Status: Act
XYGEN ADMINISTRATION - ADULT				
Electronically signed by: Ordering user: MD 03/06/	MD on 03/06/17 1515 17 1515	Ordering provider:	MD	Status: Acti
IITIATE				
	MD on 03/06/17 1515 17 1515	Ordering provider:	MD	Status: Acti
KG				
Electronically signed by: Ordering user: MD 03/06/	MD on 03/06/17 1515 17 1515	Ordering provider:	MD	Status: Complete
PO				
Electronically signed by: Ordering user: Discontinued by: MD 03/06/17 1		Ordering provider:	MD	Status: Discontinu
·				
ONSULT TO INTERVENTIONAL CARDIOLOG	MD on 03/06/17 1515			Otation And
Electronically signed by: Ordering user: MD 03/08/		Ordering provider:	MD	Status: Act
ITAL SIGNS				
Electronically signed by: Ordering user: MD 03/06/	MD on 03/06/17 1515 17 1515	Ordering provider:	MD	Status: Act
IITIATE				
Electronically signed by: MD 03/06/	MD on 03/06/17 1515 17 1515	Ordering provider:	MD	Status: Act
KG				
Electronically signed by: MD 03/06/	MD on 03/06/17 1515 17 1515	Ordering provider:	MD	Status: Complet
PO				
Electronically signed by: MD 03/06/17 1 Discontinued by: MD 03/06/17 1		Ordering provider:	MD	Status: Discontinu
ONSULT TO INTERVENTIONAL CARDIOLOG	Y			
Electronically signed by: Ordering user: MD 03/06/	MD on 03/06/17 1515 17 1515	Ordering provider:	MD	Status: Act

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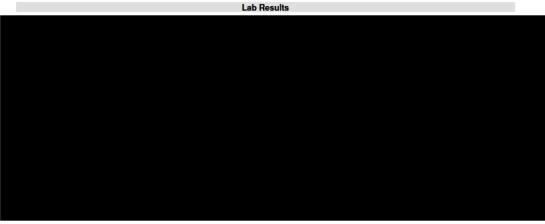
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All Orders Excluded (continued) VITAL SIGNS (continued) Status: Active MD on 03/06/17 1515 CARDIAC MONITORING MD on 03/06/17 1515 Status: Active Ordering provider: MD PULSE OXIMETRY Electronically signed by: Ordering user: MD on 03/06/17 1515 Status: Active Ordering provider: SALINE LOCK IV Status: Active Electronically signed by: Ordering user: MD on 03/06/17 1515 MD 03/06/17 1515 Ordering provider: DRAW RAINBOW TUBE AND HOLD FOR FUTURE ORDERS Status: Active Electronically signed by:
Ordering user: MD on 03/06/17 1515 MD 03/06/17 1515 Ordering provider: OXYGEN ADMINISTRATION - ADULT MD on 03/06/17 1515 MD 03/06/17 1515 Status: Active Electronically signed by:
Ordering user: Ordering provider: MD <u>EKG</u> on 03/06/17 1514 03/06/17 1514 Electronically signed by: Ordering user: Status: Completed Ordering provider: <u>EKG</u> Electronically signed by: on 03/06/17 1514
Ordering user: 03/06/17 1514
Discontinued by: MD 03/06/17 15 Status: Discontinued Ordering provider: MD 03/06/17 1515



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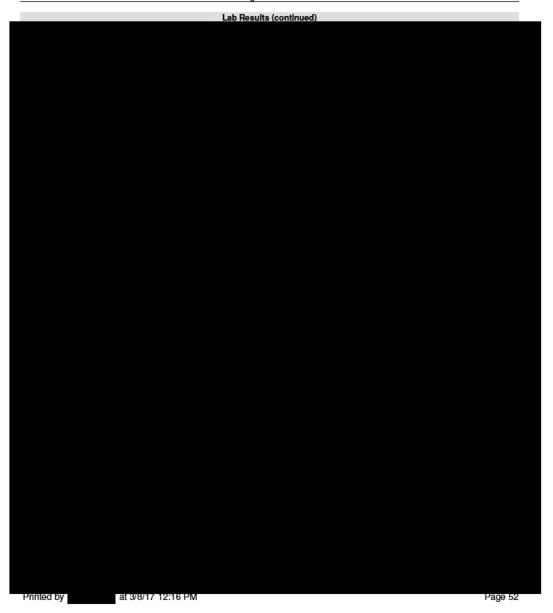
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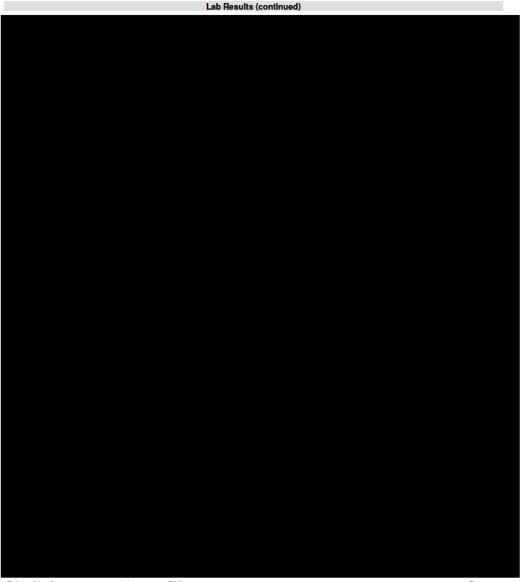
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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

Adm: 3/6/2017, D/C:



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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Lab Results (continued)

DRUGS OF ABUSE SCREEN 8, URINE, RANDOM [736906484] (Abnormal)

Resulted: 03/06/17 1624, Result status: Final result

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

	MD 03/06/17 1520 Resulting lab: SUTTER MEDICAL CENTER, SACRAMENTO	GS OF ABUSE SCREEN 8, URII	DANDOM [736006484] (Ab	normal) (continued)	Docult	ted: 03/06/17 1624. Result status: Final re
MENTO	Collected On Urine 03/06/17 1530 Value Reference Range Flag Pos Neg A GNR2 nine Confirmation Test RAMPCS Neg GNR2 Neg Neg GNR2 mL Neg Neg GNR2					<u>'</u>
	Value Reference Range Flag Lab	Ordering provider:	MD 03/06/17 1520	Resulting lab:	SUTTER ME	DICAL CENTER, SACRAMENTO
	Value	Specimen Information				
	Value Reference Range Flag Lab Pos Neg A GNR2 nine Confirmation Test RAMPCS Neg GNR2 Neg Neg GNR2 Meg GNR2 GNR2 mL Neg Neg GNR2	Type Urine				
	Pos Neg A GNR2 nine Confirmation Test RAMPCS Neg GNR2 Neg Neg GNR2 Neg GNR2 GNR2 Neg Neg GNR2 Neg GNR2 GNR2 Neg GNR2 GNR2 Neg GNR2 GNR2 Meg GNR2 GNR2 mL Neg GNR2	Unine	Offine	03/06/17 1530		
	Pos Neg A GNR2 nine Confirmation Test RAMPCS Neg GNR2 Neg Neg GNR2 Neg GNR2 GNR2 Neg Neg GNR2 Neg GNR2 GNR2 Neg GNR2 GNR2 Neg GNR2 GNR2 Meg GNR2 GNR2 mL Neg GNR2	Components				
	Pos Neg A GNR2 nine Confirmation Test RAMPCS Neg GNR2 Neg Neg GNR2 Neg GNR2 Neg mL Neg GNR2	zomponents	Value	Reference Range	Flag	Lab
	Neg Neg GNR2 mL Neg GNR2 Neg GNR2	Amphetamines, Urine				
	Neg Neg GNR2 Meg GNR2 Meg GNR2 Meg GNR2 Meg GNR2	Comment:				
	Neg Neg GNR2 Meg GNR2 Meg GNR2 Meg GNR2 Meg GNR2	Detection Limit: 1.0 mcg/mL				
	Neg Neg GNR2 Meg GNR2 Meg GNR2 Meg GNR2 Meg GNR2	Confirmatory test upon request only		•		
	Neg Neg GNR2 Neg GNR2 Neg GNR2 GNR2	Please place add on order for Amp	tamine Confirmation Test RAMPC	8		
	Neg Neg GNR2	Barbiturates, Urine	Neg	Neg		GNR2
	Neg Neg GNR2 nL Neg Neg GNR2	Comment: Detection Limit: 0.2 mg		-		
	Neg Neg GNR2 Neg GNR2 Neg GNR2 Neg GNR2 nL Neg GNR2 Neg GNR2 GNR2 GNR2	Benzodiazepine, Urine		Neg		GNR2
	Neg Neg GNR2 Neg Neg GNR2 Neg Neg GNR2 nL Neg Neg GNR2	Coraine, Urine Cocaine, Urine		Nog		CNPa
	Neg Neg GNR2 Neg GNR2 Neg GNR2 nL Neg GNR2 Neg GNR2	Comment: Detection Limit: 0.3 mg		Iveg		GIVINZ
	. Neg Neg GNR2 . Neg Neg GNR2 nL Neg Neg GNR2	Methadone, Urine	Neg	Neg		GNR2
	Neg Neg GNR2 nL Neg Neg GNR2	Comment: Detection Limit: 0.3 mg				
	Neg Neg GNR2 nL Neg Neg GNR2	Opiates, Urine		Neg		GNR2
	nL Neg Neg GNR2	Comment: Detection Limit: 0.3 mo PCP, Urine		Nea		GNR2
		Comment: Detection Limit: 0.025				
	Neg Neg GNR2			Neg		GNR2
	Neg Neg GNH2			Nee		ONIDo
				Neg		GNH2
			cg/mL Neg - Neg	Neg		GNR2



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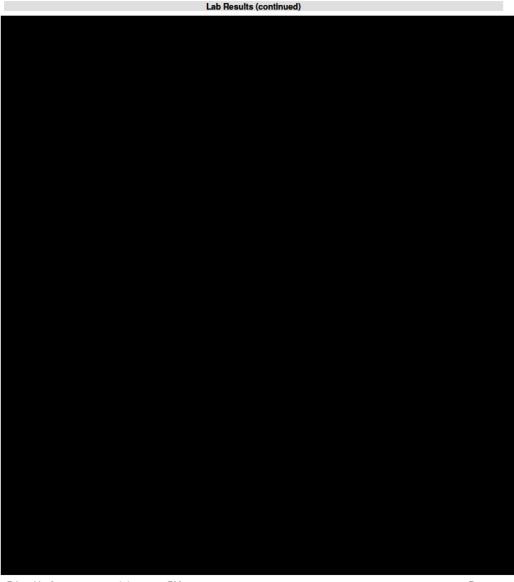
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Adm: 3/6/2017, D/C:



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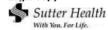
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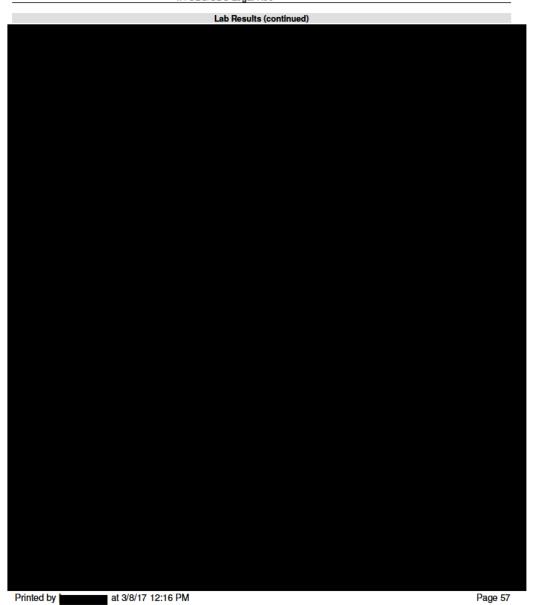
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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:



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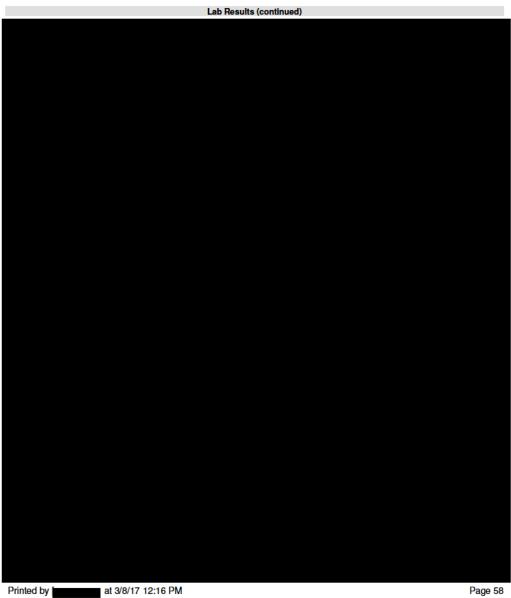
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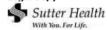
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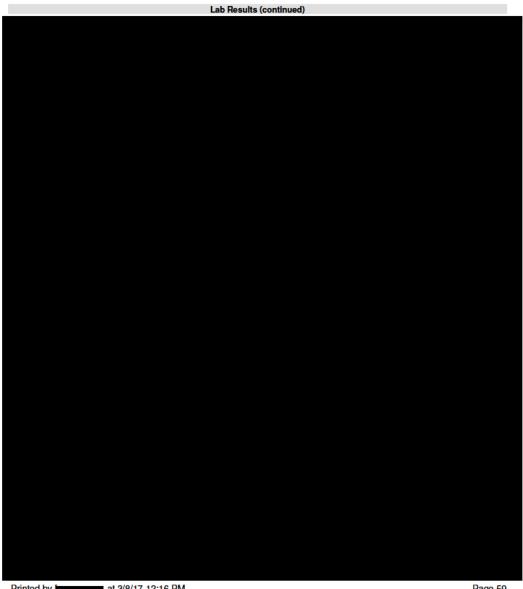
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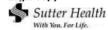
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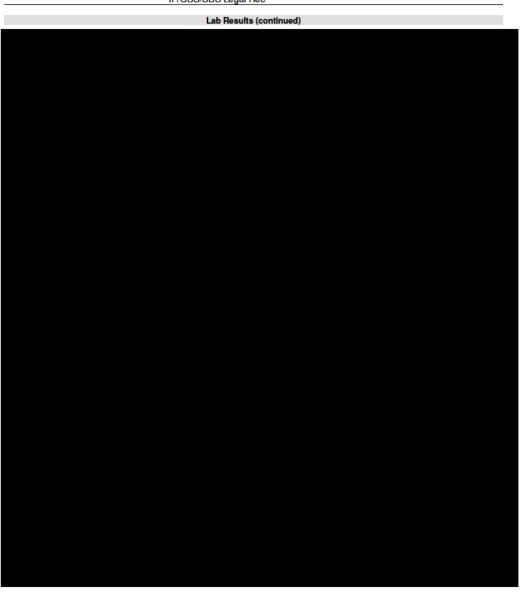
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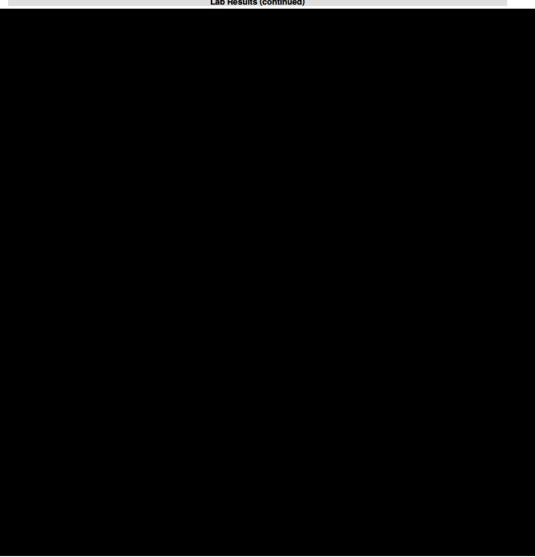
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Lab Results (continued)



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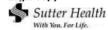
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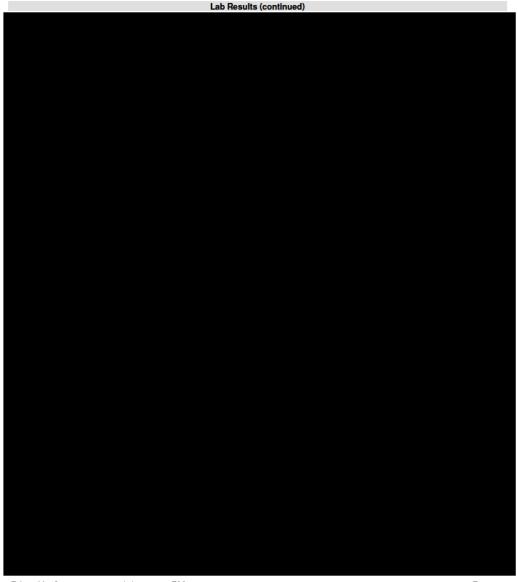
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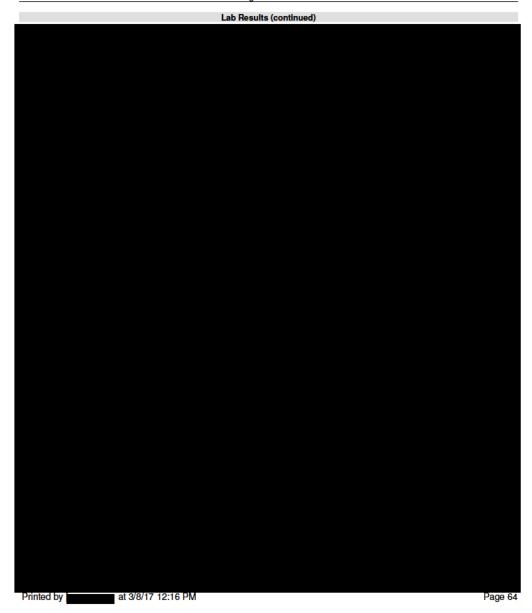
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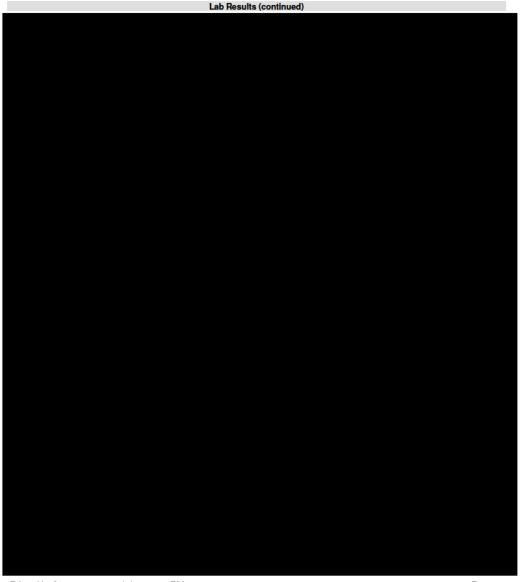
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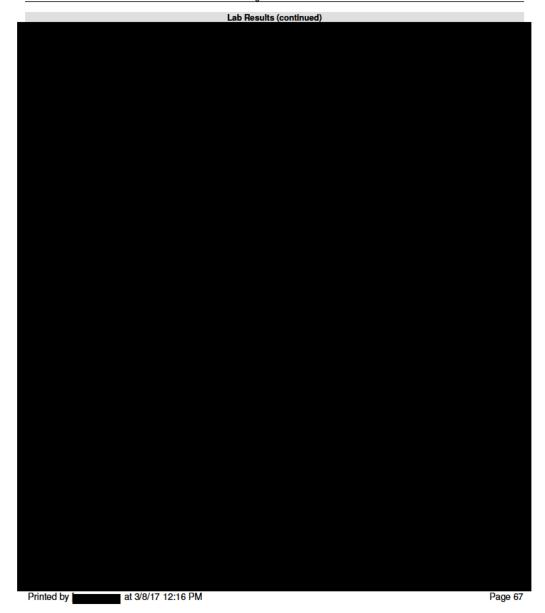
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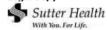
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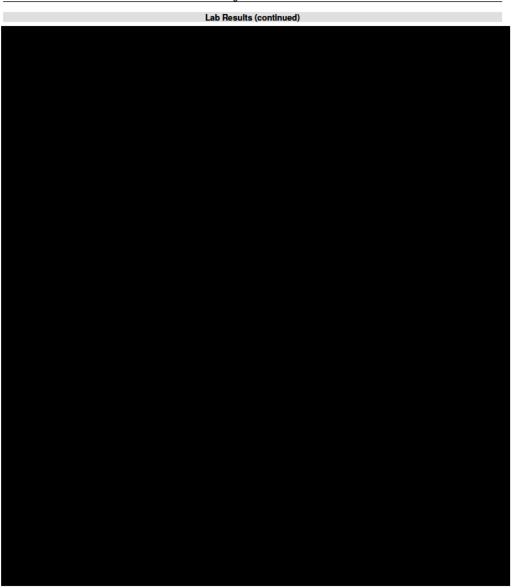
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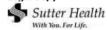
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Lab Results (continued)



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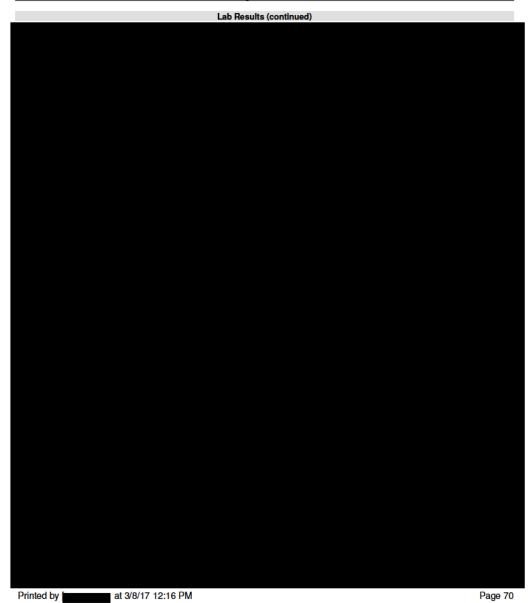
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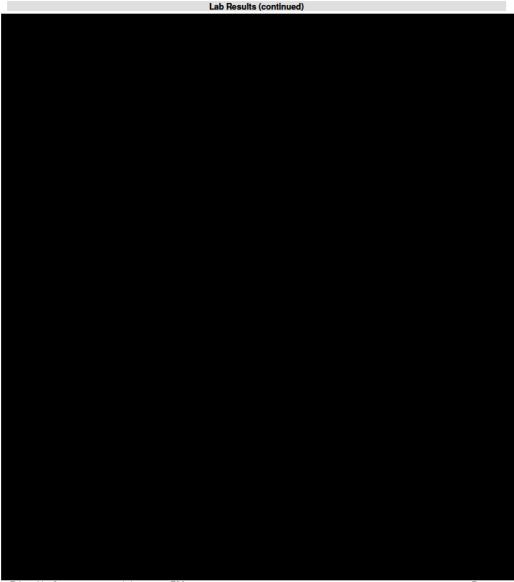
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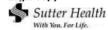
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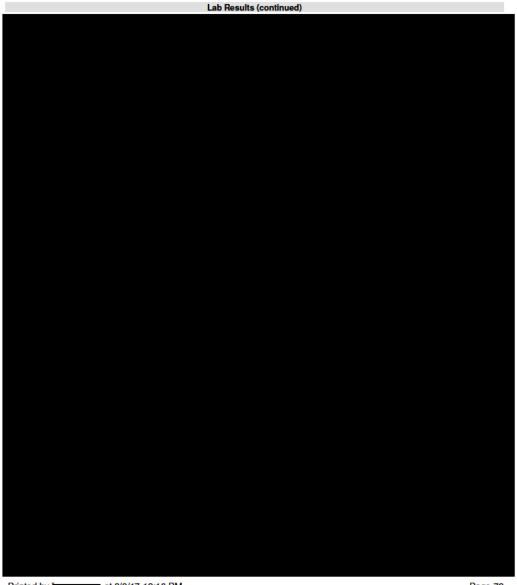
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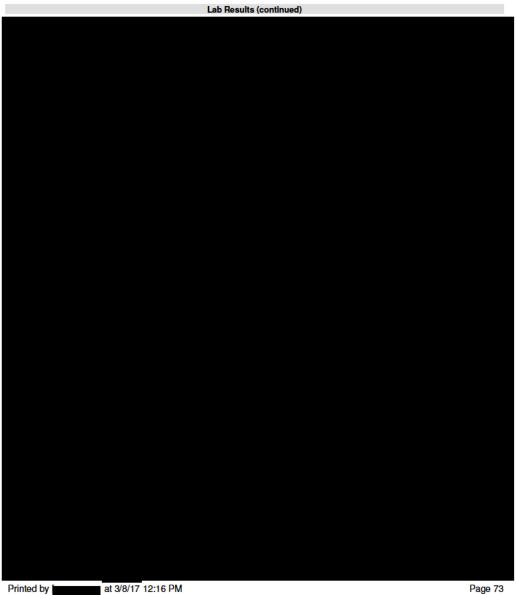
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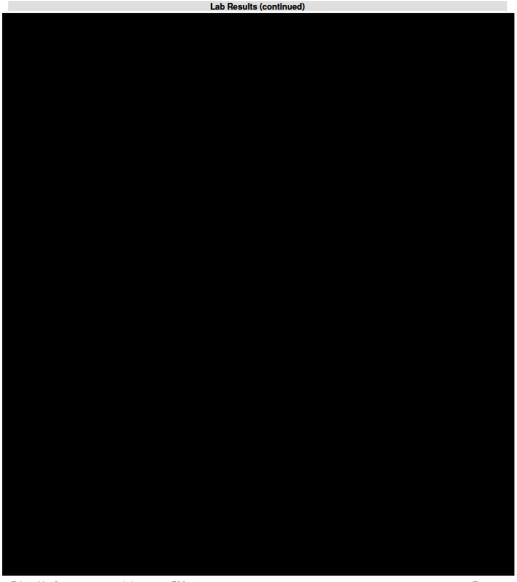
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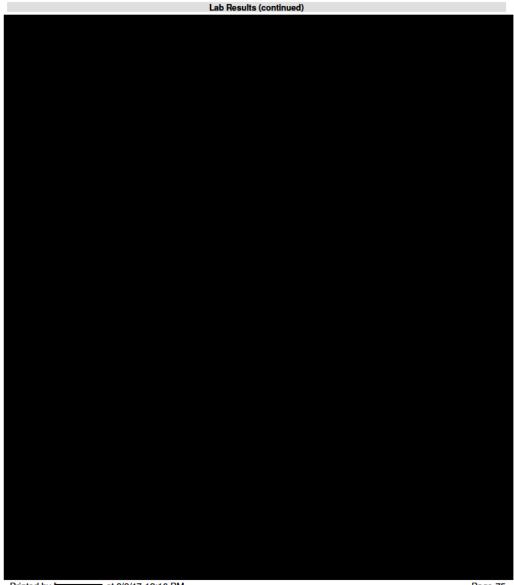
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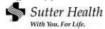
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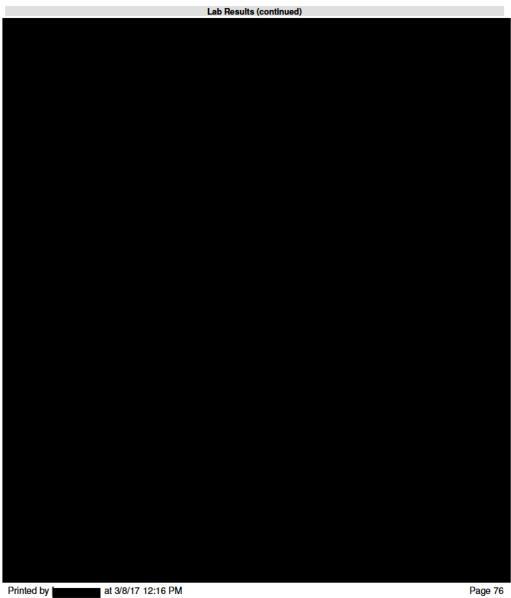
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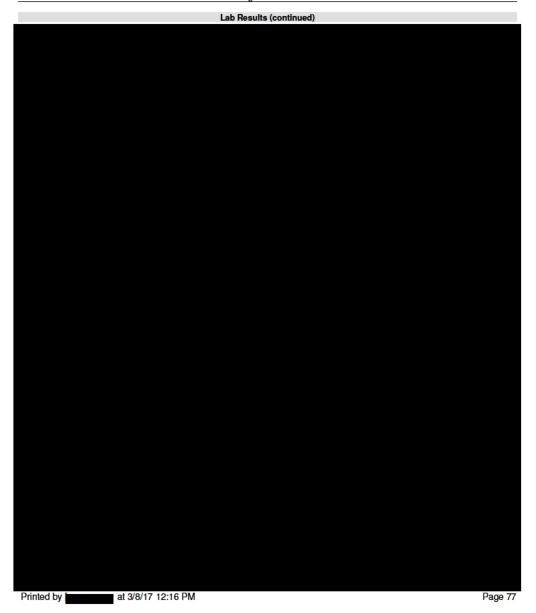
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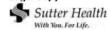
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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Lab Results (continued)

PATH REVIEW HEM [736962501]

Resulted: 03/08/17 1032, Result status: Final result

Ordering provider: Specimen Information	MD 03/06/17 1520	Resulting lab:	SUTTER MEDICAL CENTER, SACRAMENTO
Туре	Source	Collected On	
Miscellaneous		03/06/17 1520	

Components

Components					
	Value	Reference Range	Flag	Lab	
Specimen Source	Peripheral Blood Smear			GNR2	
Pathology Review Hematology Comment: Reviewed by , M.D.				GNR2	

Result:
Drugs, toxins (including alcohol), liver disease, autoimmune disorders, vitamin B12 and lotate deficiency, and myelodysplastic syndrome may cause macrocytosis / macrocytic anemia.

Testing Performed By

- comment by					
	Lab - Abbreviation	Name	Director	Address	Valid Date Range
	55 - GNR2	SUTTER MEDICAL	, MD	2825 Capitol Avenue	08/10/15 0727 - Present
		CENTER, SACRAMENTO		SACRAMENTO CA 95816	
	410 - SMF Lab	SUTTER MEDICAL	, MD	1625 Stockton Blvd.	12/08/16 1407 - Present
		FOUNDATION CLINICAL		2nd floor suite 208	
		LAB		SACRAMENTO CA 95816	

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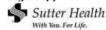


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Adm: 3/6/2017, D/C:

RADIOLOGY ORDERS AND RESULTS XR CHEST PORTABLE Electronically signed by: Ordering user: Status: Completed Ordering provider: XR CHEST PORTABLE MD on 03/06/17 1515 Electronically signed by: This order may be acted on in another end Status: Completed MD 03/06/17 1515 Ordering provider: Ordering user: Final result Performed: Narrative: 03/06/17 1528 - 03/06/17 1557 SUTTER HEALTH RADIOLOGY Resulting lab: PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male PROCEDURE: XR CHEST PORTABLE, 3/6/2017 3:28 PM ACCESSION NUMBER(S): MCD17000603785 LOCATION: SAMC CLINICAL INDICATION: Chest Pain. COMPARISON: None TECHNIQUE: Single AP view of the chest. FINDINGS: Mediastinum and hila: Hila appear mildly prominent. Lines and tubes: Endotracheal tube tip 3.5 cm above the carina. Lungs and pleura: Mild pulmonary vascular congestion with very mild interstitial prominence. No definite focal consolidation, pneumothorax or pleural effusion. Bones and soft tissues: The osseous structures are unremarkable. Impression: IMPRESSION: Mild pulmonary vascular congestion with mild interstitial prominence may represent mild interstitial pulmonary edema. Mild prominence the hila may simply represent prominence of the central pulmonary arteries however underlying adenopathy is not excluded. When patient is able recommend dedicated PA and lateral views of the chest to better evaluation. Electronically Signed by MD, Sutter Medical Group 3/6/2017 4:10 PM CT BRAIN WO CONTRAST Status: Completed Electronically signed by: Ordering user: MD on 03/06/17 1516 MD 03/06/17 1516 Ordering provider: CT BRAIN WO CONTRAST Status: Completed Electronically signed by: MD on 03/06/17 1516 This order may be acted on in another encounter. Ordering user: Final result MD 03/06/17 1516 Ordering provider: MD Printed by at 3/8/17 12:16 PM Page 79

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

RADIOLOGY ORDERS AND RESULTS (continued)

CT BRAIN WO CONTRAST (continued)

03/06/17 1601 - 03/06/17 1606

Resulting lab:

SUTTER HEALTH RADIOLOGY

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male AGE: 34 years

PROCEDURE: CT BRAIN WO CONTRAST, 3/6/2017 4:01 PM ACCESSION NUMBER(S): MCC17000603841 LOCATION: SAMC

CLINICAL INDICATION: ALOC.

COMPARISON: None

Axial non-contrast CT images were obtained from the skull base to the vertex at 5 mm slice thickness in brain and bone algorithm.

Brain: Ventricles and sulci appropriate for age. No midline shift, acute intracranial hemorrhage, or hydrocephalus. Probable small arachnoid cyst in the posterior aspect of the posterior

Orbits: Visualized portions are within normal limits.

Sinuses and otomastoids: No mucosal thickening or air-fluid

Calvarium: Unremarkable.

Visualized soft tissues: Unremarkable.

Impression: IMPRESSION:

No acute intracranial process.

Total exam Dose Length Product for a 671 mGy-cm Total exam CT Dose Index 38.3 mGy

Electronically Signed by Group 3/6/2017 4:35 PM

Med, Sutter Medical

CT CERVICAL SPINE WO CONTRAST

Electronically signed by: MD on 03/06/17 1538
Ordering user: MD 03/06/17 1538 Status: Completed Ordering provider: MD

CT CERVICAL SPINE WO CONTRAST

Electronically signed by: MD on 03/06/17 1538
This order may be acted on in another encounter. Status: Completed Ordering user: MD 03/06/17 1538 Ordering provider: Final result
Performe
Narrative: rmed: SUTTER HEALTH RADIOLOGY 03/06/17 1601 - 03/06/17 1609 Resulting lab:

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male

PROCEDURE: CT CERVICAL SPINE WO CONTRAST, 3/6/2017 4:01 PM ACCESSION NUMBER(S): MCC17000604478 LOCATION: SAMC

CLINICAL INDICATION: Injury.

COMPARISON: None

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

RADIOLOGY ORDERS AND RESULTS (continued)

CT CERVICAL SPINE WO CONTRAST (continued)

TECHNIQUE: Helical non-contrast CT images were obtained through the cervical spine with 2 mm sagittal and coronal reformats.

FINDINGS:

Osseous /disc structures: Normal bony alignment without fracture or dislocation. Verlebral body height well-maintained. Disc space height well-maintained.

Soft tissues: Mild patchy infiltrate in the medial right upper lung field. Patient is intubated.

C2-3: No bony canal or foraminal narrowing. C3-4: No bony canal or foraminal narrowing. C4-5: No bony canal or foraminal narrowing. C5-6: Mild dorsal disc bulge without significant bony canal or

foraminal narrowing.
C6-7: No bony canal or foraminal narrowing.
C7-T1: No bony canal or foraminal narrowing.

IMPRESSION:

No acute fracture or subluxation in the cervical spine.

Total exam Dose Length Product for a 580 mGy-cm Total exam CT Dose Index 22.1 mGy

Printed by at 3/8/17 12:16 PM

Electronically Signed by Med, Sutter Medical Group 3/6/2017 4:41 PM

XR CHEST PORTABLE

Electronically signed by: Ordering user:	MD on 03/06/17 1641 MD 03/06/17 1641	Ordering provider:	MD	Status:	Completed
CHEST PORTABLE					
Electronically signed by: This order may be acted on in				Status:	Completed
Ordering user:	MD 03/06/17 1641	Ordering provider:	MD		
Performed: Narrative:	03/06/17 1702 - 03/06/17 1746	Resulting lab:	SUTTER HEALTH RADIOLOGY		
PATIENT: JOHN ANTHO AGE: 34 years DOB:	DNY HERNANDEZ MRN: 2/10/1983 GENDER: Male				
PROCEDURE: XR CHES ACCESSION NUMBER(S LOCATION: SAMC	ST PORTABLE, 3/6/2017 5:02 PM S): MCD17000605811				
COMPARISON: 3/6/2016	at 3:45 PM				
CLINICAL INDICATION:	ET Tube. Line placement.				
TECHNIQUE: Portable A	P view of the chest.				
3 cm above the carina. T nasogastric tube, with dis quadrant of the abdomen field-of-view. Lungs are b areas of lung consolidatis mediastinal structures ap	with distal tip positioned approximately here has been interval placement of a stal end extending into the left upper a uthough distal tip is excluded from the illaterally well expanded. No confluent on or pleural effusions. Heart and pear stable. There is persistent i pulmonary vasculature noted and left				

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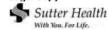
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GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

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SUTTER MEDICAL CENTER SACRAMENTO 2825 Capitol Ave Sacramento CA 95816 IP/OBS/SDS Legal Rec

HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

Adm: 3/6/2017, D/C:

RADIOLOGY ORDERS AND RESULTS (continued)

XR CHEST PORTABLE (continued)

Impression: IMPRESSION:

- Interval placement of nasogastric tube. ET tube remains in satisfactory position.
 Persistent prominent central pulmonary vascular congestion, right greater than left, without significant interval change.
 Cannot exclude underlying adenopathy.

Electronically Signed by 3/6/2017 5:54 PM MD, Sutter Medical Group

Electronically signed by: Ordering user:	MD on 03/07/17 1119 MD 03/07/17 1119	Ordering provider:	MD	Status:	Discontinued
Discontinued by:	03/07/17 1127				
CHEST PORTABLE					
Electronically signed by				Status:	Discontinued
Ordering user: Discontinued by:	MD 03/07/17 1119 03/07/17 1127	Ordering provider:	MD		
CHEST PORTABLE					
Electronically signed by: Ordering user:	on 03/07/17 1127	Ordering provider:	MD	Status	: Completed
CHEST PORTABLE					
Electronically signed by:				Status	: Completed
This order may be acted Ordering user:	on in another encounter.	Ordering provider:	MD		
Final result	03/07/17 1127	Ordering provider.	MU		
Performed: Narrative:	03/07/17 1129 - 03/07/17 1142	Resulting lab:	SUTTER HEALTH RADIOLOGY	,	
	NTHONY HERNANDEZ MRN: DOB: 2/10/1983 GENDER: Make				
	CHEST PORTABLE, 3/7/2017 11:29 AM BER(S): MCD17000612385				
CLINICAL INDICAT	TION: Post-Procedure.				
COMPARISON: 3/6	¥2017				
	able semi-upright frontal examination of the ed by material external to the patient, planket.				
FINDINGS:					
	num: The heart is normal in size. The				

Printed by at 3/8/17 12:16 PM

Tubes and Lines: Endotracheal tube is seen with its tip approximately 4.4 cm above the carina. Nasogastric tube has its tip in the stomach. Left subclavian vein triple-lumen catheter has its tip in the low SVC. Lungs: The lungs are clear. There is no pleural effusion or

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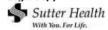
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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

RADIOLOGY ORDERS AND RESULTS (continued)

XR CHEST PORTABLE (continued)

Osseous Structures/Other: Osseous structures are unremarkable

IMPRESSION:

Life-support hardware is in satisfactory position. No pneumothorax.

Limited exam, as above.

Electronically Signed by 3/7/2017 12:24 PM , MD, Sutter Medical Group

XR CHEST PORTABLE

Electronically signed by: MD on 03/08/17 0816 Ordering user: MD 03/08/17 0816 Status: Active Ordering provider: MD

XR CHEST PORTABLE

Electronically signed by: MD on 03/08/17 0816
Ordering user: MD 03/08/17 0816 Status: Active Ordering provider: MD



Progress Notes

Care Team Note by Crager, Ronald S at 03/06/17 1708
Service: Respiratory
Date of Service: 03/06/17 1708 Author Type: Respiratory Care Practitioner Status: Signed

Pt brought to ED byEMS approx 1515 intubated bym ventilation. 1520 cpr started For five minutes. Pt had 7.0 et tube in place BS equal with a positve co2 reading on etco2 monitor.

at 03/06/17 1714

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HERNANDEZ, JOHN ANTHONY MRN:

DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by at 03/06/17 1905

ICU Filed: 03/06/17 191 Date of Service: 03/06/17 1905 Author Type: Registered Nurse Status: Signed

1645 Pt admitted from ER, intubated, agitated but not following commands. drip titrated per MD order. Dr. at bedside, continue Hypothermia protocol. Cooling wrap applied. OGT inserted, CXR done. VSS monitored. Labs repeated. Results relayed to Dr.

1730 Target Temp reached (34 degrees Celsius).

1800 Repeated ABG, results relayed to Dr. No changes. VSS.

Signed by at 03/06/17 1911

Care Team Note by at 03/06/17 2100

Service: Respiratory
Date of Service: 03/06/17 2100

Author Type: Respiratory Care Practitioner Status: Signed

RESPIRATORY THERAPIST ARTERIAL LINE INSERTION PROCEDURE NOTE

Patient's Name: John Anthony Hernandez

MRN: DOB: 2/10/1983 Date: 3/6/2017 Time: 9:58 PM

Ordering Physician: Dr.

3/6/2017 9:58 PM

INDICATION: Hemodynamic monitoring Need for repeated laboratory studies

There is no previous medical history on file.

LABS:

Recent Labs

Lab 03/06/17 03/06/17 03/06/17 1840 1520 1558 **WBC** 9.6 **HGB** 12.3 L 11.6 L 13.6 **HCT** 44.3 PLT 228

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued) Care Team Note by at 03/06/17 2100 (continued) Recent Labs Lab 03/06/17 03/06/17 1520 1720 18.4 H 22.2 H INR 1.5 H 1.9 H PTT 35.0 50.3 H

DIAGNOSIS: Hemodynamic instability / advanced hemodynamic monitoring required

DESCRIPTION OF TECHNIQUE:

Informed consent was obtained including risks, benefits, and alternatives. Time-out verifying patient's identity, site, and side of placement was performed. The right radial was prepped with Chlorhexidine. Sterile technique was used. Palpation / Ultrasound guidance. was used to locate artery. Arterial access was obtained with a 20 G needle, and using a modified Seldinger technique, A 20 G catheter was passed into the vessel. Transducer line confirmed at zero. The catheter was secured and dressed in the usual fashion.

DISPOSITION: The patient tolerated the procedure well.

COMPLICATIONS: None apparent

COMMENTS:

at 03/06/17 2203 Care Team Note by at 03/06/17 2246 Service: Respiratory
Date of Service: 03/06/17 2246 Author Type: Respiratory Care Practitioner Status: Signed

Ventilator Discontinuance Protocol

Initiate Ventilator Discontinuance Protocol per physician order.

The Spontaneous Evaluation Assessment Criteria (Phase II) is: Sedation adequate to assess spontaneous criteria

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HERNANDEZ, JOHN ANTHONY MRN:

DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

at 03/06/17 2246 (continued)

- Glasgow Coma score to be greater than or equal to 8
- Patient's cough should not cause significant pain
- NIF greater than or equal to -20 cm H2O
- Minute ventilation less than or equal to 15 L/M
- RSBI to be less than 100 breaths per minute per liter.

Conduct initial spontaneous breathing trial (SBT) for 5 minutes:

- Continue on ventilator with no pressure support or pressure control
- Maintain PEEP
- Maintain FiO2 (less than or equal to 0.5)

At the 5-minute mark of the SBT, measure NIF, VE and RSBI. Assess for success indicators.

Success indicators:

- Systolic blood pressure between 90-180 mm Hg.
- Heart rate less than 140 beats/minute and no more than a 20% change
- No increased anxiety
- SpO2 greater than or equal to 90%
- Respiratory rate less than or equal to 35/minute and no more than a 50% change.

If the patient passes the spontaneous evaluation criteria and success indicators are met, continue for an additional 25 minutes (30 minutes total).

- After 5-minute mark, if patient exhibits increased work of breathing or anxiety, utilize T-mist or add PS
 - o 8 cm for a 7 size tube
 - o 6 cm for 8 size tube
- If patient has a tracheostomy, utilize T-mist

Obtain ABG after initial 30 minute trial and 30 minutes after any change in patient status.

A SBT is to continue for at least 30 minutes but no more than 120 minutes to assure maximum sensitivity and safety. If the patient has a history of lung disease, continue the SBT to a total of 2 hours. Reassess for success indicators at least every 30 minutes. If success indicators remain stable through the SBT, contact physician with ABG results and extubation orders.

at 03/06/17 2249

Care Team Note by at 03/06/17 2248 Service: Respiratory
Date of Service: 03/06/17 2248 Filed: 03/06/17 22

Author Type: Respiratory Care Practitioner Status: Signed



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SACRAMENTO POLICE DEPARTMENT

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by

at 03/06/17 2248 (continued)

Ventilator Protocol

Patient's Name: John Anthony Hernandez

MRN: DOB: 2/10/1983 Date: 3/6/2017 Time: 10:48 PM

Ordering Physician: Dr 3/6/2017 10:48 PM

Initiate Ventilator Protocol per physician order.

- · Pulse Oximetry, continuous
- · Capnography, continuous
- Correlate PetCO₂ with ABG; if the difference between PaCO₂ and PetCO₂ is less than or equal to 10 mm Hg, use the PetCO₂ values to adjust the minute volume.
- Subglottic suctioning every four hours (assess every two hours) or may use the Hi/Low Evac ET tube
- Respiratory Aerosol Medication Protocol
- Mechanical ventilator settings:
 - Select any mode that allows for criteria to be met
 - ✓ Set V_T of 6-8 ml/kg of predicted body weight
 - ✓ Set Respiratory Rate: 10-14/minute
 - ✓ Call physician if Pplat greater than or equal to 30 cm H₂O
 - ✓ PEEP of 5 cm H₂O initially
 - \checkmark FiO₂ and PEEP: Adjust to maintain SpO₂ at or above 90% or PaO₂ at or above 60.
 - ✓ Increase FiO₂ first to maintain SpO₂ at or above 90% or PaO₂ at or above 60.
 - √ For FiO₂ less than 0.5 and 5 cm H₂O PEEP, increase FiO₂ in 0.1 increments
 - \checkmark For FiO₂ greater than 0.5 and 5 cm H2O PEEP, increase PEEP in 2-3 cm H₂O increments to a high of 15 cm H₂O unless hemodynamically unstable
- Assess for Auto PEEP upon initiation of the ventilator and at every monitoring of the ventilator. When Auto-PEEP is measured at greater than 5 cm H2O, the following actions should be taken to attempt to bring the measurement down to 5 cm H20 or below:
 - √ adjust inspiratory time and/or
 - ✓ adjust peak flow rate and/or
 - ✓ adjust inspiratory rise and/or
 - √ adjust PEEP to 5 cm H20

If these efforts are not successful, the MD is to be notified.

- Obtain ABG within 30 minutes of initial ventilator settings repeat ABG's after 30 minutes when there is a significant change of patient status or a questionable correlation in SpO2 or EtCO2/TcCO2.
- After 30 minutes
 - ✓ Maintain SpO₂ at or above 90% using above parameters
 - ✓ Adjust minute volume to keep pH 7.30 to 7.45 and PaCO₂ 30-50 mmHg

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DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by

at 03/06/17 2248 (continued)

- ✓ For patients on the Therapeutic Hypothermia Protocol, adjust minute volume to keep temperature corrected PaCO₂ 32 – 36 mmHg.
- Obtain initial chest radiograph for tube placement and contact MD for additional orders if patient status changes or suspect tube displacement.
- Perform comprehensive respiratory assessment including
 - Assessment for respiratory aerosol medication
 - ✓ Assessment for ventilator discontinuance indications (see Patient Ventilator System Check Procedure, 7.4.011)
- Obtain sputum culture upon intubation and as needed if suctioned secretions are increased or exhibit a change of color from normal, collect a sputum culture.
- If patient is nasally intubated, discuss with physician for tube replacement.
- Ventilator Discontinuance Protocol including
 - ✓ Performance of Spontaneous Evaluation Criteria
 - Evaluation of success indications for ventilator discontinuance
 - If hemodynamic stability is in question, discuss with RN and MD.
- If indications for ventilator discontinuance/safety screen are met, perform spontaneous evaluation criteria. If the spontaneous evaluation criteria fails due to the failure of the RSBI measurement, and the respiratory rate is less than 35, then the SBT can be performed.
- When spontaneous evaluation criteria are met, begin Ventilator Discontinuance Protocol.
- Contact physician to change to the ARDS Ventilator Management Protocol when either of the following conditions occur:
 - ✓ PaO₂/FiO₂ ratio less than-300 with an FiO2 of 0.6 or greater
 - · Bilaterial infiltrates seen on frontal chest radiograph

If aerosol medications are indicated, complete respiratory aerosol medication order set.



Ventilator Discontinuance Protocol

Initiate Ventilator Discontinuance Protocol per physician order.

The Spontaneous Evaluation Assessment Criteria (Phase II) is:

- Sedation adequate to assess spontaneous criteria
- · Glasgow Coma score to be greater than or equal to 8
- Patient's cough should not cause significant pain
- NIF greater than or equal to -20 cm H2O
- Minute ventilation less than or equal to 15 L/M

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DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by

at 03/06/17 2248 (continued)

RSBI to be less than 100 breaths per minute per liter.

Conduct initial spontaneous breathing trial (SBT) for 5 minutes:

- Continue on ventilator with no pressure support or pressure control
- Maintain PEEP
- Maintain FiO2 (less than or equal to 0.5)

At the 5-minute mark of the SBT, measure NIF, VE and RSBI. Assess for success indicators.

Success indicators:

- Systolic blood pressure between 90-180 mm Hg.
- Heart rate less than 140 beats/minute and no more than a 20% change
- No increased anxiety
- SpO2 greater than or equal to 90%
- Respiratory rate less than or equal to 35/minute and no more than a 50% change.

If the patient passes the spontaneous evaluation criteria and success indicators are met, continue for an additional 25 minutes (30 minutes total).

- . After 5-minute mark, if patient exhibits increased work of breathing or anxiety, utilize T-mist or add PS
 - o 8 cm for a 7 size tube
 - 6 cm for 8 size tube
- If patient has a tracheostomy, utilize T-mist

Obtain ABG after initial 30 minute trial and 30 minutes after any change in patient status.

A SBT is to continue for at least 30 minutes but no more than 120 minutes to assure maximum sensitivity and safety. If the patient has a history of lung disease, continue the SBT to a total of 2 hours. Reassess for success indicators at least every 30 minutes. If success indicators remain stable through the SBT, contact physician with ABG results and extubation orders.

Signed by at 03/06/17 2249

Author Type: Respiratory Care Practitioner Status: Signed



RESPIRATORY SERVICES ADULT ASSESSMENT

Step1:

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by at 03/06/17 2247 (con Patient's Name: John Anthony Hernandez at 03/06/17 2247 (continued)

MRN: DOB: 2/10/1983 Date: 3/6/2017

Time: 10:47 PM Chief Complaint: Cardiac Arrest



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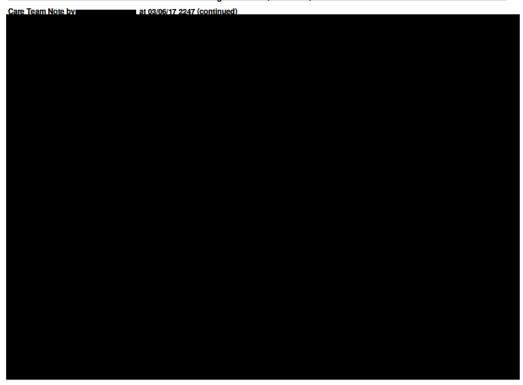


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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

Adm: 3/6/2017, D/C:

Progress Notes (continued)



Care Team Note by

at 03/06/17 2247
Service: Respiratory
Date of Service: 03/06/17 2247 (Respiratory Care Practitioner)

Author Type: Respiratory Care Practitioner Status: Signed

RESPIRATORY CARE AEROSOL MEDICATION ORDER PROTOCOL

Protocol ordered by physician.

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by TIME: 10:47 PM at 03/06/17 2247 (continued)
DATE: 3/6/2017

RCP Signature:



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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

Adm: 3/6/2017, D/C:

Progress Notes (continued)



at 03/06/17 2312

Care Team Note by at 03/06/17 2248

Service: Respiratory
Date of Service: 03/06/17 2248

Author Type: Respiratory Care Practitioner Status: Signed

Respiratory Therapy Ventilator End of Shift Summary

Modality: Ventilator

Current Settings:

at 3/8/17 12:16 PM Printed by

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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

Adm: 3/6/2017, D/C:

Progress Notes (continued) at 03/06/17 2248 (continued) CarePlan Notes by at 03/07/17 0525

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

at 03/07/17 0525 (continued)
Service: ICU CarePlan Notes by

Date of Service: 03/07/17 0525

Author Type: Registered Nurse Status: Signed

Problem: Patient Care Overview

Goal: Plan of Care Review

Outcome: Ongoing (interventions implemented as appropriate)

VS stable overnight, on hypothermia protocol for rewarming at 1730. ? Posturing during suctioning. Fentanyl and propofol gtt increased for RASS -4. Released from police dept custody at 0500. K low,replaced. Bloody OGT output and +occult blood,NP aware.

Signed by at 03/07/17 0525

Care Team Note by at 03/07/17 0709

Service: Respiratory
Date of Service: 03/07/17 0709 Author: Filed: 03/07/17 0714

Author Type: Respiratory Care Practitioner Status: Signed

Respiratory Therapy Ventilator End of Shift Summary

Modality: Ventilator

Current Settings: Vent Mode: PRVC Vt: 520ml Rate Set: 24 PEEP (cm H2O): 5

Oxygen Concentration (%): 30

Airway: ET Tube. Size: 7.0.

Location: Teeth. 24cm at teeth Secured by: Anchor Fast. Cuff Pressure: MLT.

Changes made during shift: Increased ventilatory settings and weaned Fio2. Received pt on PRVC Vt 500, x24, +5, 40%. Increased Vt to 520 and decreased Fio2 to 35%. ABG was drawn with compensated results and good oxygenation. Weaned Fio2 to 30%. Pt continues on same settings with ETCO2 still reading 28.

RecentABG(s):

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)



. RN (Registered Nurse) **Problem: Patient Care Overview**

Goal: Plan of Care Review

Outcome: Ongoing (interventions implemented as appropriate)
UPDATE CARE COORDINATION NOTE

Expected Discharge Date: 03/10/17 Current: LOS: 1 day

Date of Service: 03/07/17 1022

Expected Discharge Disposition/ Services/Plan: Still a patient

Transportation at discharge: tbd

Patient/Family Goals: tbd

Patient Identified Support for discharge

planning: Update Assessment: Possible mother

Unable to meet with pt, intubated on hypothermia therapy. S/p cardiac arrest. No family at bedside. Per discussion with physician, may anticipate length of stay greater than 7

days this hospitalization. CM to follow for evolving needs. Page 96

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RN at 03/07/17 1022 (contin

HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

CarePlan Notes by

CURRENT ASSESSMENT

Plan of Care reviewed with:

Current Mental Status/ Cognitive Functioning:

Current Level of Function: Current Activity Limitations: Current Activity Tolerance:

RN 3/7/2017 10:20 AM

PRIOR LIVING ASSESSMENT PCP: No primary care provider on file. Pharmacy: No pharmacy on file.

No PCP on file

Lives With: other (see comments) (unknown) Identified Support/ Caregiver at home:

Living Arrangements: other (see comments) (unknown) Current

Agencies/Facilities

Able to Return to Prior **Prior Level of** Living Arrangements: Function: **Equipment at home: Usual Activity** Tolerance:

Financial Concerns:

Discharge Risks:

Readmission Assessment:

REGULATORY

Patient/Family assessed for discharge readiness/self-management: not applicable Informed patient/family of Right of Choice: not applicable

Was a list of options delivered to patient/family?

na

RN at 03/07/17 1022 Signed by

CarePlan Notes by

LCSW at 03/07/17 1222
Service: Social Services
Date of Service: 03/07/17 1222

Type: Licensed Clinical Social Worke Signed

Problem: Patient Care Overview Goal: Plan of Care Review

Outcome: Ongoing (interventions implemented as appropriate)

CLINICAL SOCIAL WORK PROGRESS NOTE

Data: SW referred in to identify family.

Printed by at 3/8/17 12:16 PM

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

LCSW at 03/07/17 1222 (continued)

Patient brought in yesterday post cardiac arrest after being tased. Sac Police report, #17-69178. Paperwork at bedside indicates he was released from Police custody at 5:00 this morning. No belongings at bedside, RN reports that police took his belongings. Thus, no way to identify family or SDM by information that might be in his wallet or cell phone.

The address on the face sheet is the address for Salvation Army Adult Rehab, called and talked to reports patient was not staying with them. Address on ambulance run is

Unclear if this is his home address, when he last lived there, why he is in Sacramento. No phone number listed with this address.

Spoke with Sac PD, 808-5471 asked if they are able to provide hospital with family or contact information from patient's belongings or records. He responded that "patient is on black out" and he would have to speak with his supervisors before releasing any contact information. Currently patient is "confidential" patient at the hospital.

Patient's name is common and difficult to identify through on-line searches.

Patient positive for meth at admit.

Assessment: Unable to identify family members or friends to act as SDM. Unclear patient's living situation.

Plan: Will await response from Sac PD regarding SDM information.

Clinical Social Worker:

LCSW 3/7/2017

11:40 AM

LCSW at 03/07/17 1222

CarePlan Notes by

LCSW at 03/07/17 1530

LCSW Service: Social Services
Date of Service: 03/07/17 1530

LCSW (Licensed Clinical Social Worker)

Author Type: Licensed Clinical Social Worker Status: Signed

Problem: Patient Care Overview Goal: Plan of Care Review

Outcome: Ongoing (interventions implemented as appropriate)

CLINICAL SOCIAL WORK PROGRESS NOTE

Data: Officer A Pettit present for update on patient. SW asked Officer Pettit to follow through to see if any family members have been identified. He called in, reported there is no family identified at this time. Will let the officer in the ED know if anyone is identified and they will let the floor know.

Assessment: No family or SDM identified by police.

Plan: SW to continue to follow to attempt to identify SDM.

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

CarePlan Notes by LCSW at 03/07/17 1530 (continued)

Clinical Social Worker: LCSW

3/7/2017 3:27 PM

Signed by LCSW at 03/07/17 1530

CarePlan Notes by at 03/07/17 1715

Author: Service: ICU Author Type: Registered Nurse Filed: 03/07/17 1715 Date of Service: 03/07/17 1715 Status: Signed

Problem: Patient Care Overview

Goal: Plan of Care Review

Outcome: Ongoing (interventions implemented as appropriate)

EOSS: Pt s/p cardiac arrest following Sac PD contact tazing due to pt being belligerent and disruptive. Hypothermia protocol ends at 1730, slow rewarming per protocol. Pt's creatinine worse, no UOP since 1200, on bicarb gtt. Social worker was not able to locate family but informed by SAC PD that they were able to locate a relative with contact info. Police officer will only release relative info to social worker who has left for the day. Obtained detective Eddie Macaulay 916-956-4554 for further info. Plan to wait for pt to rewarm and monitor neuro status, contact relative and if making any neuro improvement without sedation will discuss hemodialysis.

Signed by at 03/07/17 1715

 Care Team Note by
 at 03/07/17 0748
 Author:
 Service: ICU
 Author Type: Registered Nurse

 Filed: 03/07/17191
 Date of Service: 03/07/17 0748
 Status: Signed

Pt on hypothermia protocol goal temp achieved at 3/6/17 1730 with labs every 6 hrs. Pt sedated and intubated on fentanyl and propofol gtts. Weak gag and cough reflex with suctioning. Pupils equal at 2.5 mm but sluggish, oral care done without issues. Urine concentrated, tea colored via foley and creatinine increased. FMS in placed irrigated and flush with free water without resistance. OGT at 65 cm to bottom lip with dark brown drainage via LIWS. SCDs in placed. No family at bedside but social work consulted to aid with locating family. Left arm NIBP 15-20 pts higher than ABP via right radial.Dr. at bedside rounding, updated on increased creatinine, concentrated low UOP, + gastric occult via OGT. No new orders for now. Plan to evaluate once rewarming process starts at 1730 today.

1018 AM rounds completed with Dr. discussed concern for concentrated urine output with foley patency checked with irrigation, CK 70170, no central line so not able monitor CVP, ionized calcium 0.99. Order received for bicarb gtt and placement of central line after rounds.

1055 Dr. at bedside to place central line, still waiting for pharmacy to deliver bicarb drip.

1110 Labs drawn via right radial aline, left subclavian TLC, dressing applied aseptically.

Printed by **Exercise** at 3/8/17 12:16 PM

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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983. Sex: M

Adm: 3/6/2017, D/C:

Progress Notes (continued) Care Team Note by at 03/07/17 0748 (continued) 1129 Pt moderately shivering, pt's temp 36.2, lowered cooling machine temp to 35.2 and Dr. notified of shivering. Requested to start with demerol first before nimbex. Order received. 1140 PCXR done, Dr. reviewed film at bedside, verbally ordered OK to use TLC, transduced CVP via distal port running about 7. Pharmacy called regarding bicarb gtt. Shivering improved after demerol. 1310 Dr. paged, pt has no UOP for 2 hrs, bicarb gtt started at 1148. 1330 Dr. returns page, discussed lack of UOP for 2 hrs and creatinine increased to 3.07., No new orders. 1408 Dr. at bedside, still no urine and foley irrigated again no resistance. No new orders and social is not able to locate family at this time, waiting of Sac PD for call back. 1610 Suggested calcium chloride for Ionized calcium of 0.94, remains anuric. Ordered 1 amp of calcium chloride. Will recheck labs at 1700. No neuro change. Therapeutic hypothermia ends at 1730. 1700 Slowly weaning sedation and room thermostat set to 70 from 68 degrees to start rewarming slowly at 1730. 1735 Pt's mother called unit inquiring about pt. Per mother she was notified by Sac PD. Verified pt's DOB with mother. Mother was distraught, crying and upset. Reassured pt and instructed to focus on son and to get to sacramento safely from Given address and phone number to hospital. SAC PD at bedside also updated. 1800 Pt's brother at bedside, update given, questions addressed, reassured and POC discussed. Brother very supportive, calm and cooperative. 1910 Report given to RN, endorsed pt in rewarming process, stable condition, labs next at 2300. Care Team Note by at 03/07/17 2003 Author Type: Respiratory Care Practitioner Status: Signed Service: Respiratory
Date of Service: 03/07/17 2003 RESPIRATORY SERVICES ADULT ASSESSMENT

Step1:

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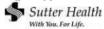
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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by at 03/07/17 2003 (cor Patient's Name: John Anthony Hernandez at 03/07/17 2003 (continued)

MRN: DOB: 2/10/1983 Date: 3/7/2017 Time: 8:03 PM

Chief Complaint: Cardiac Arrest



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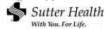
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Progress Notes (continued)



Signed by at 03/07/17 2005

CarePlan Notes by

at 03/08/17 0547

Service: Respiratory
Date of Service: 03/08/17 0547

Author Type: Respiratory Care Practitioner Status: Signed

Problem: Patient Care Overview Goal: Plan of Care Review

Outcome: Ongoing (interventions implemented as appropriate)

Respiratory Therapy Ventilator End of Shift Summary

Printed by at 3/8/17 12:16 PM

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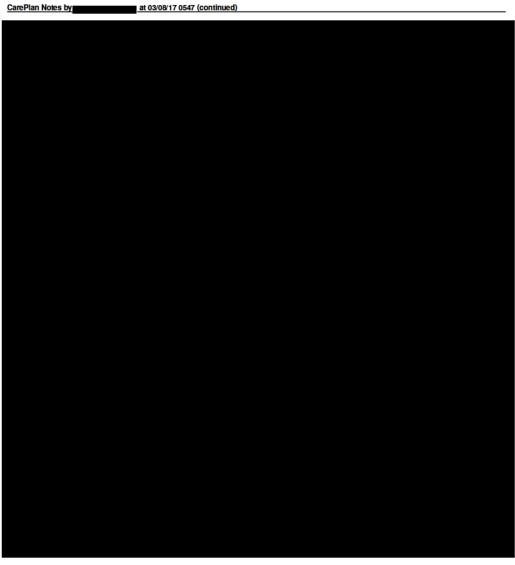
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DOB: 2/10/1983, Sex: N Adm: 3/6/2017, D/C:

Progress Notes (continued)



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DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued) CarePlan Notes by at 03/08/17 0547 (continued) Signed by at 03/08/17 0547 Type: Respiratory Care Practitioner Signed Care Team Note by Service: Respiratory
Date of Service: 03/08/17 0856 Pt ETCO2 increased to 48, pt RR increased to 10. Signed by at 03/08/17 0856 PT at 03/08/17 0938
Service: Physical Therapy
Date of Service: 03/08/17 0938 CarePlan Notes by

Problem: Patient Care Overview

Goal: Plan of Care Review

Unable to progress with Early Active Mobility ICU protocol with Physical Therapy today. The patient is not meeting safety criteria due to RASS-3. Nursing to continue daily passive mobility range of motion and repositioning per protocol. PT following Monday through friday for reassessments.

Signed by , PT at 03/08/17 0938 Care Team Note by Service: Respiratory
Date of Service: 03/08/17 0944 Author Type: Respiratory Care Practitioner Status: Signed Filed: 03/

Pt ETCO2 48-55 ABGs drawn. Pt RR increased to 18 with ETCO2 = 43.

Signed by at 03/08/17 0947

CarePlan Notes by Author Type: Licensed Clinical Social Worker Status: Signed

Problem: Patient Care Overview

Goal: Plan of Care Review

Outcome: Ongoing (interventions implemented as appropriate)

CLINICAL SOCIAL WORK PROGRESS NOTE

Data: Family has been contacted by PD, they have gathered at bedside. Family includes patient's mother, SO, who he lives with, some brother sister, wife, daughter, age 7, Other friends and family at bedside. wife, and daughter, age 7, and Other frie Called Child life specialist to assist with SW to meet with family to discuss who will be primary SDM.

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MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

CarePlan Notes by LCSW at 03/08/17 1100 (continued)

Assessment: Family appropriately concerned about patient and the events that led to her hospitalization. They are calm, compliant in hospital environment, able to understand medical information.

Plan: Assign SDM, continue to be present to support family, adjustment to illness, assess patient when he is able to engage.

Clinical Social Worker:

LCSW 3/8/2017

10:54 AM

LCSW at 03/08/17 1100 Signed by

Care Team Note by at 03/08/17 1103

Service: Respiratory Date of Service: 03/08/17 1103 Type: Respiratory Care Practitione Signed

Pt sedation decreased, pt mode changed to ps/cpap at 10/5 and 30%. Pt with increased ETCO2 = to 46, pt returned to PRVC.

at 03/08/17 1104

CarePlan Notes by

LCSW at 03/08/17 1152
Service: Social Services
Date of Service: 03/08/17 1152
nsed Clinical Social Worker)

hor Type: Licensed Clinical Social Worker tus: Signed

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Problem: Patient Care Overview

Goal: Plan of Care Review

Outcome: Ongoing (interventions implemented as appropriate)

- CLINICAL SOCIAL WORK PROGRESS NOTE

She agreed to act as SDM with the Data: Spoke with patient's mother, support of patient's ex-wife,

lives in

Printed by at 3/8/17 12:16 PM

last saw patient 2 months ago. She reports he has used substances since the age of 18. He has been in and out of jail and has had gang involvement.

He has been in and out of substance abuse treatment centers, left the last two he was admitted to before completing program.

His current SO, drinks ETOH and "is not a stable influence for him. They have been together for about 4 months.

Assessment: struggling with what has happened to her son. understand medical information and is an appropriate decision maker. struggling with what has happened to her son. She is open to support, able to

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MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

LCSW at 03/08/17 1152 (continued)

Plan: SW to continue to follow for support, assist with decision making as needed.

Clinical Social Worker:

LCSW 3/8/2017

11:42 AM

LCSW at 03/08/17 1152

CarePlan Notes by at 03/08/17 1153 Service: Nutrition
Date of Service: 03/08/17 1153

(Dietitian/Nutritionist)

Author Type: Dietitian/Nutritionist Status: Signed

Problem: Patient Care Overview

Goal: Plan of Care Review

Outcome: Ongoing (interventions implemented as appropriate)

Nutrition Assessment or Vent

Assessment:

34 year old male admitted with Cardiac arrest, after being tasered by police. Patient positive for meth on admission. S/p hypothermia, currently Nephrology evaluating for possible Hemodialysis. MD in ICU rounds agreeable to start nutrition. Patient has been off Propofol since this morning so no additional calories from meds at this time.

Diet order: NPO Start Now

Height: 5' 7.008" 3/6/17

Admit Weight: 90.7 kg (200 lb)

Current BMI: Body Mass Index is 28.24 kg/m2. (Overweight, BMI 25-30)

Current Weight: 81.8 kg (180 lb 5.4 oz)

Usual Body Weight: unknown Ideal Body Weight: 67.3 kg / 148 lb



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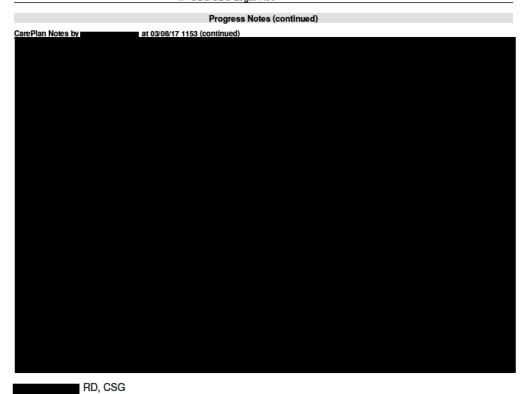
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Adm: 3/6/2017, D/C:



at 03/08/17 1153 Signed by

Care Team Note by at 03/08/17 1153 Service: Respiratory
Date of Service: 03/08/17 1153

Author Type: Respiratory Care Practitioner Status: Signed

RESPIRATORY SERVICES ADULT ASSESSMENT

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by at 03/08/17 1153 (continued)

Step1:

Patient's Name: John Anthony Hernandez

MRN: DOB: 2/10/1983 Date: 3/8/2017 Time: 11:53 AM

Chief Complaint: S/P cardiac arrest



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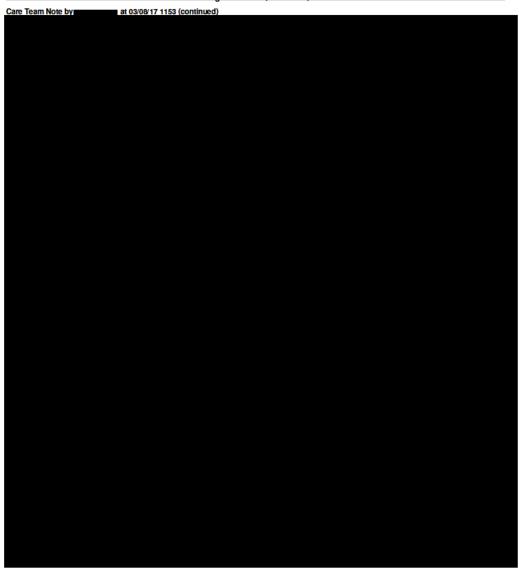
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Progress Notes (continued)



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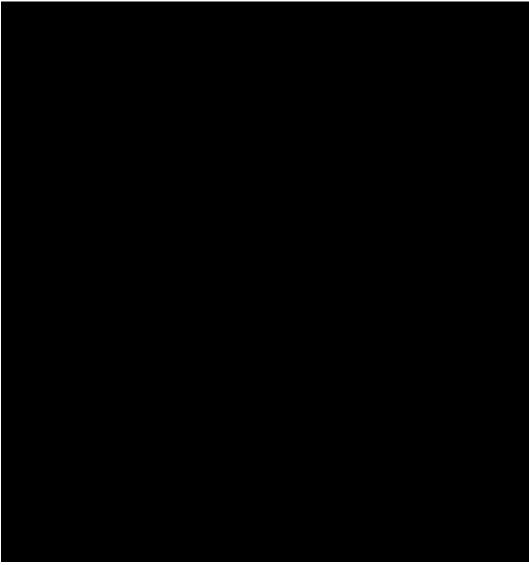
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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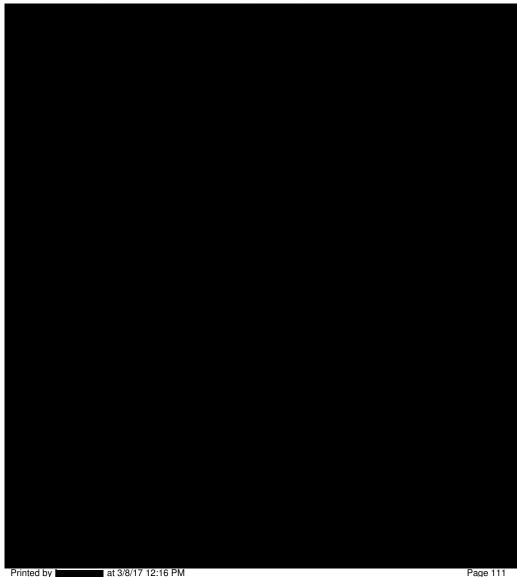
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)

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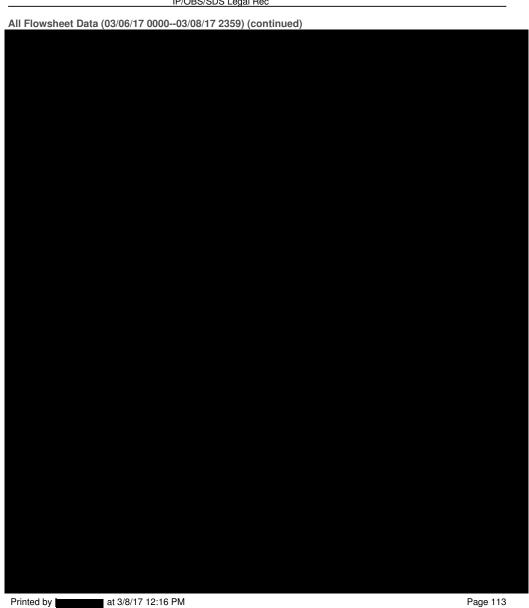
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DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:



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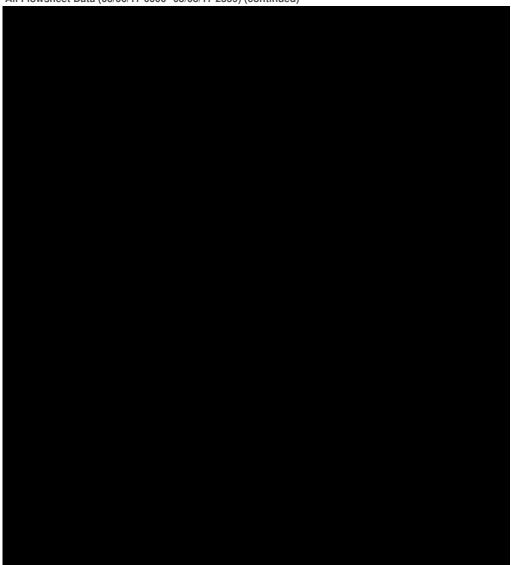
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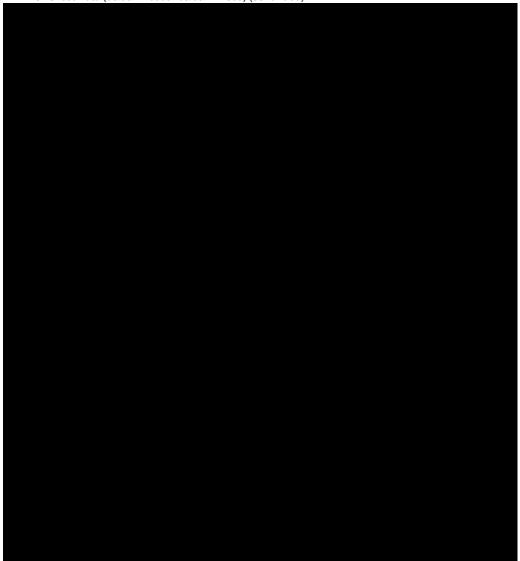
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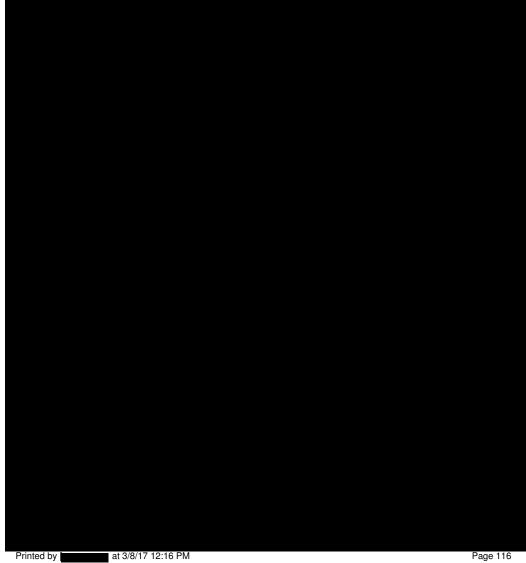
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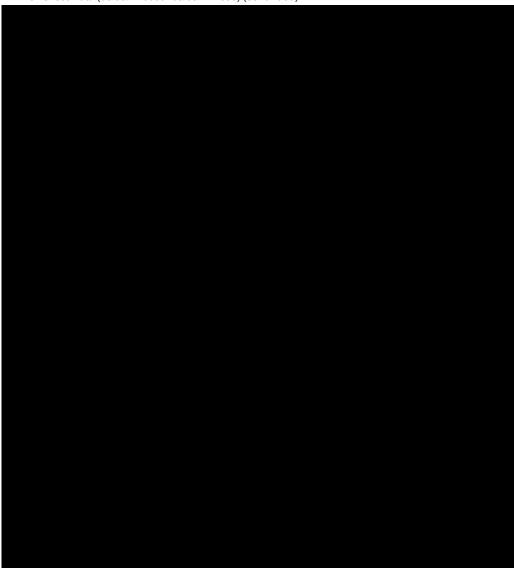
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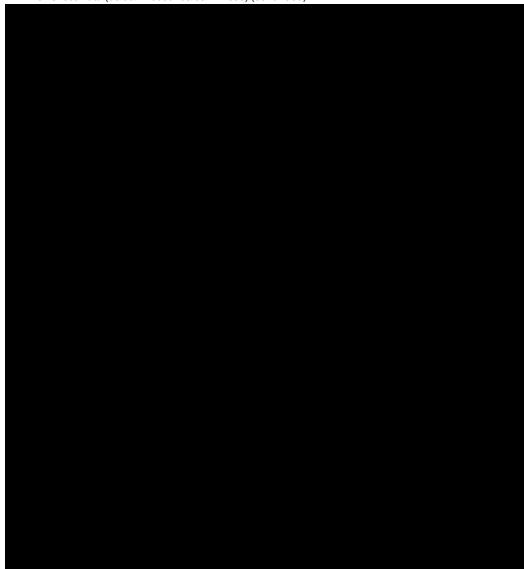
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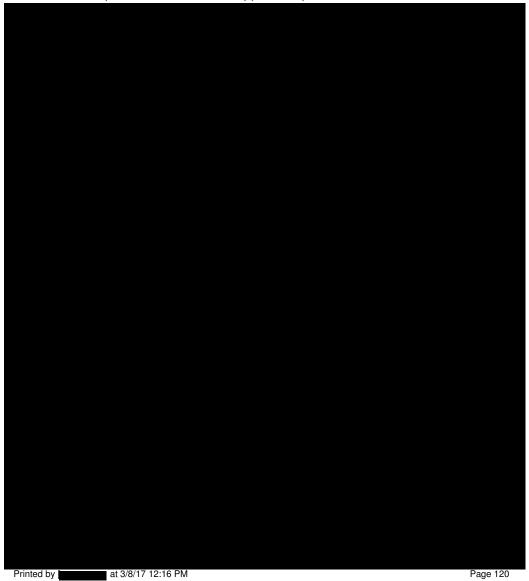
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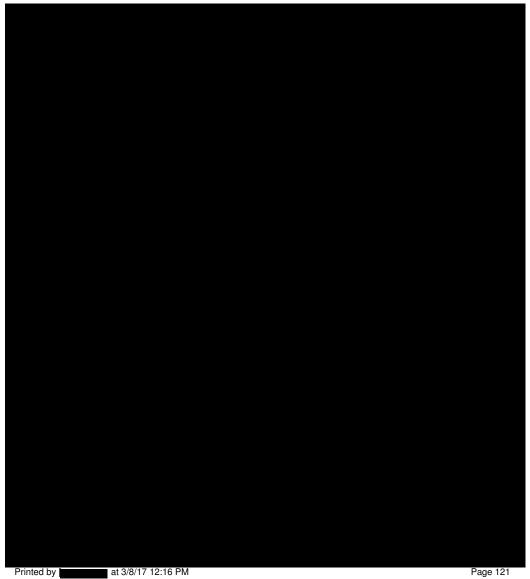
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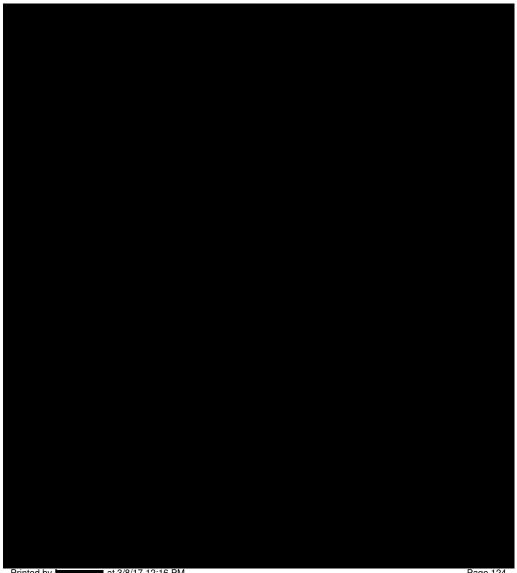
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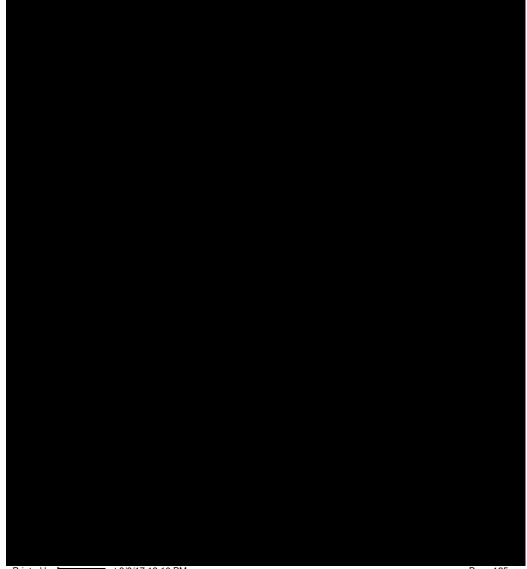
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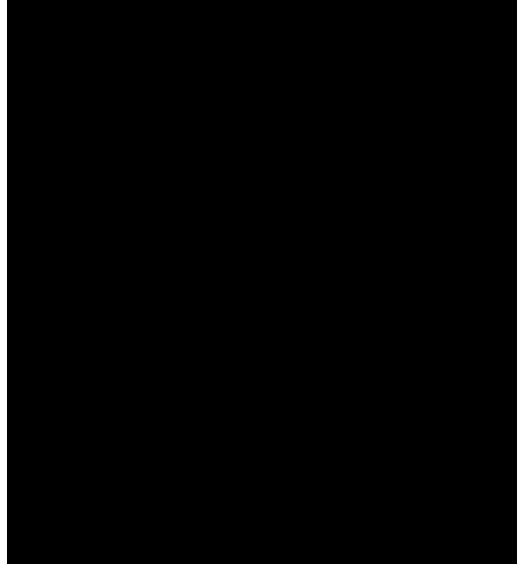
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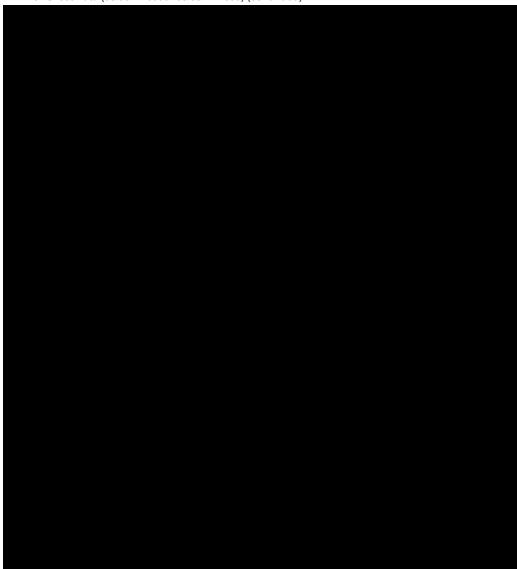
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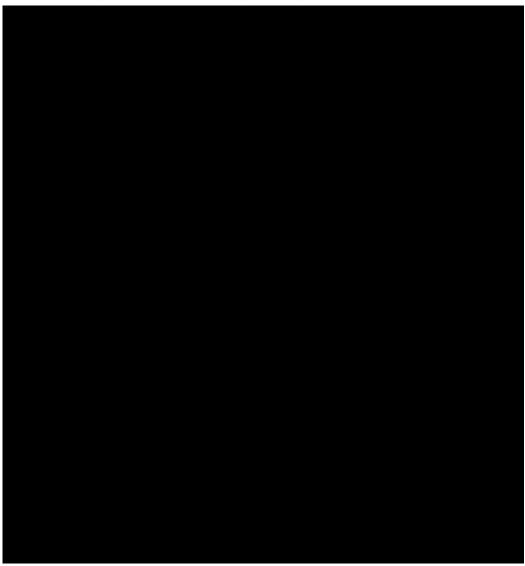
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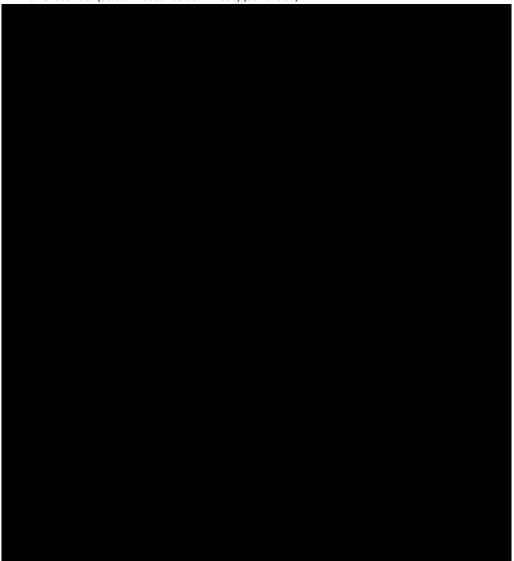
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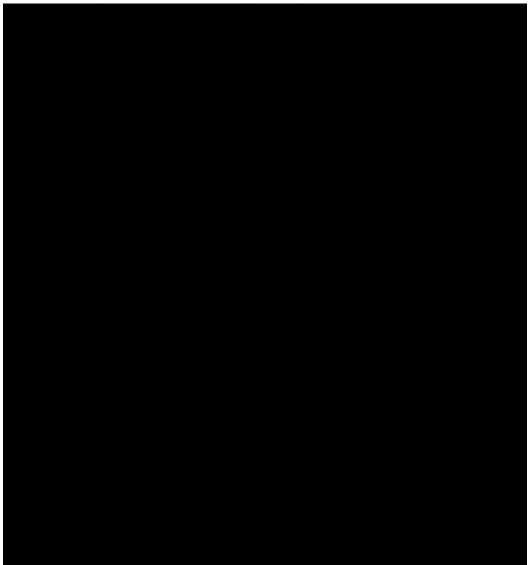
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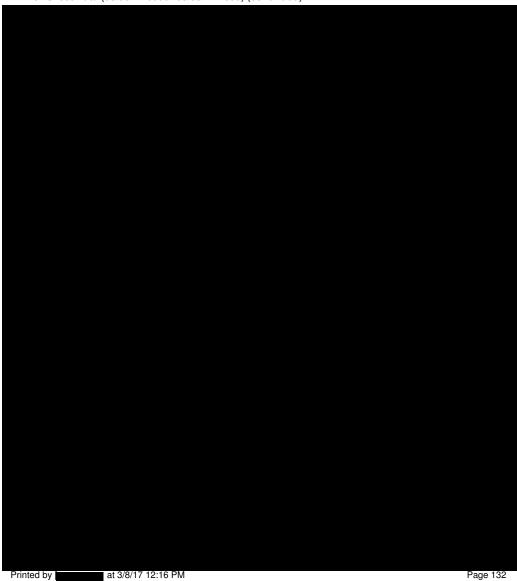
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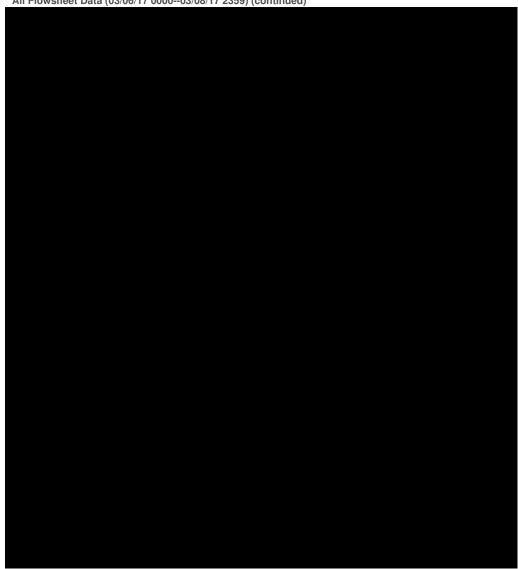
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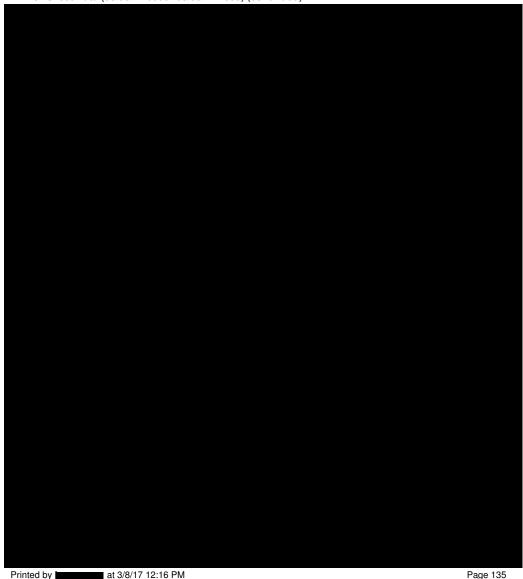
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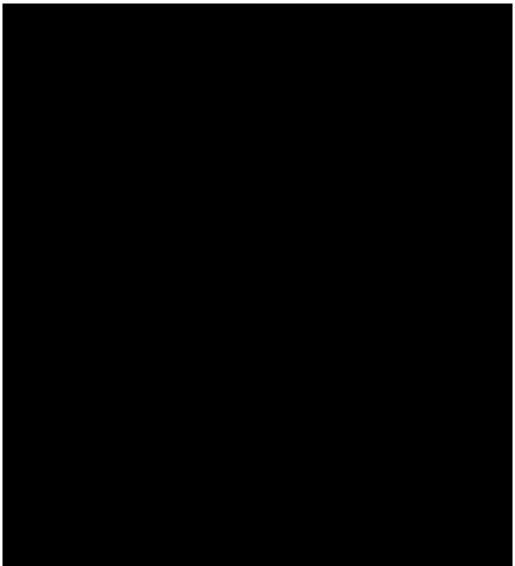
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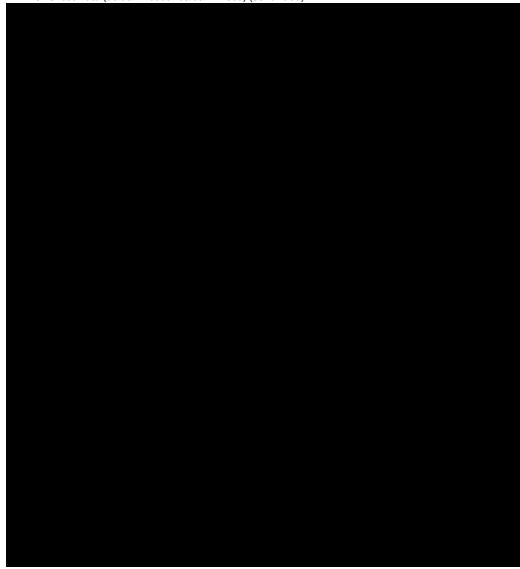
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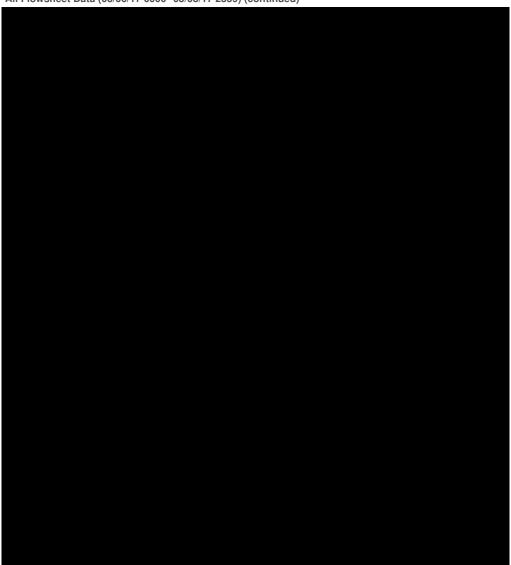
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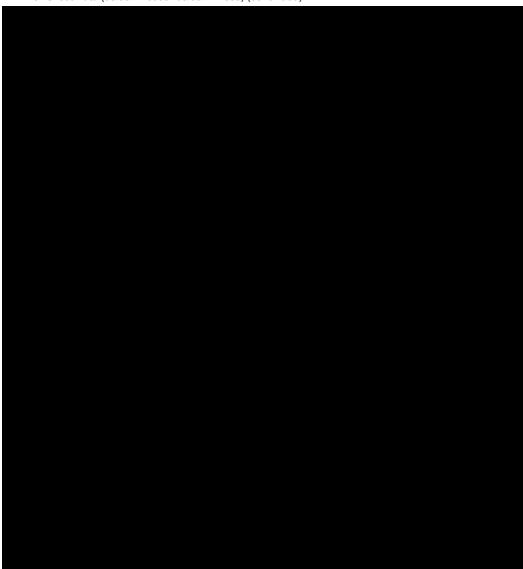
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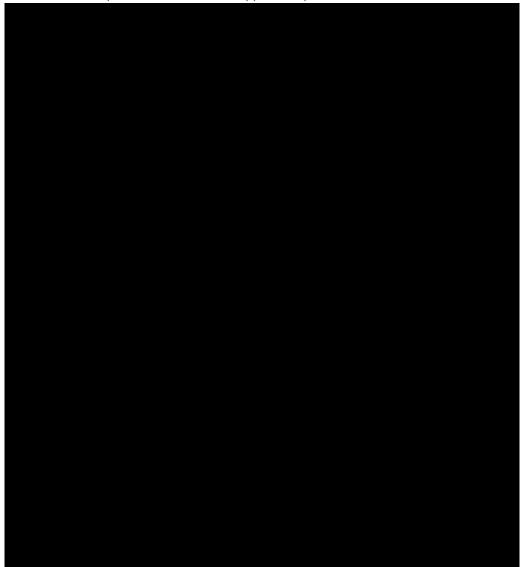
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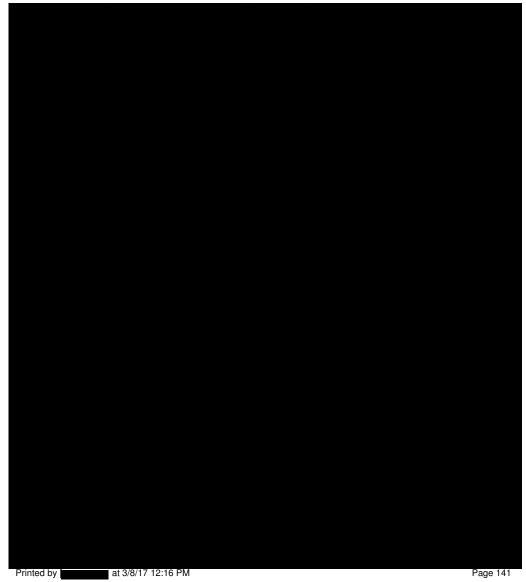
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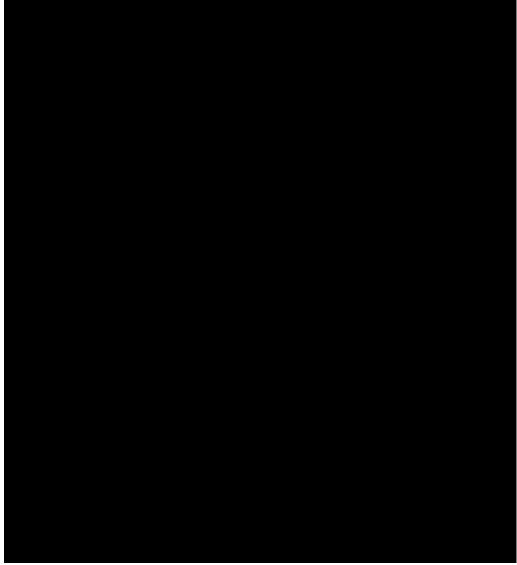
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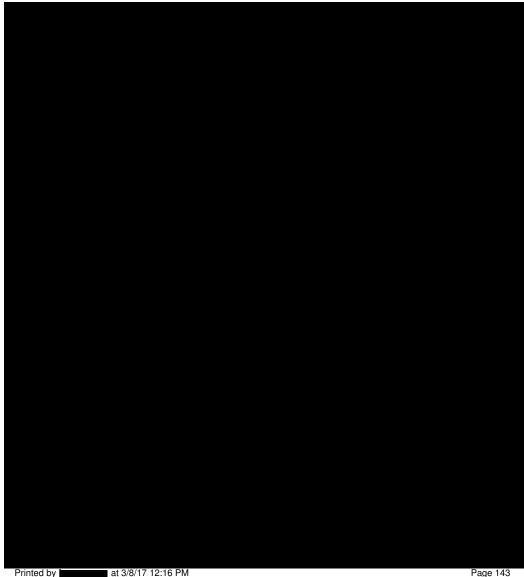
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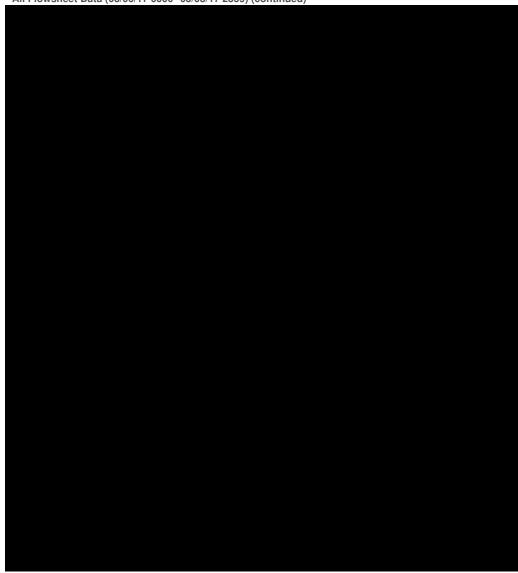
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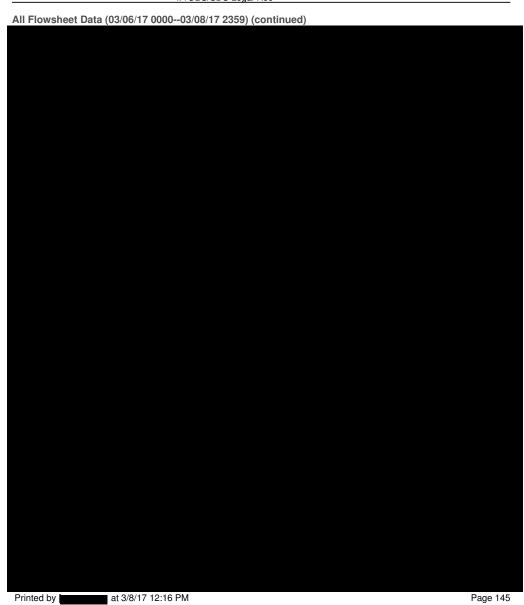
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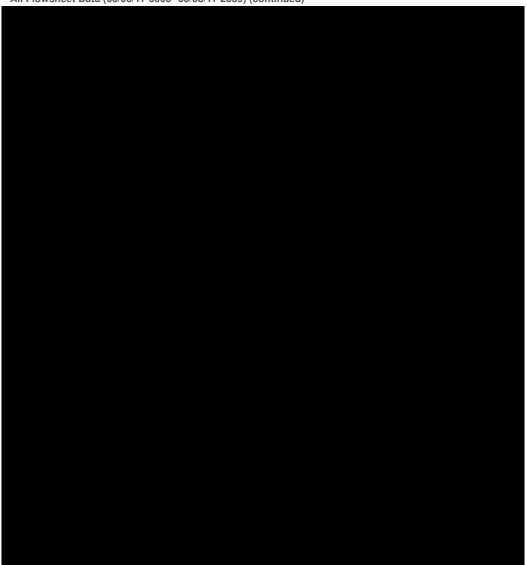
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SUTTER MEDICAL CENTER SACRAMENTO 2825 Capitol Ave Sacramento CA 95816 IP/OBS/SDS Legal Rec HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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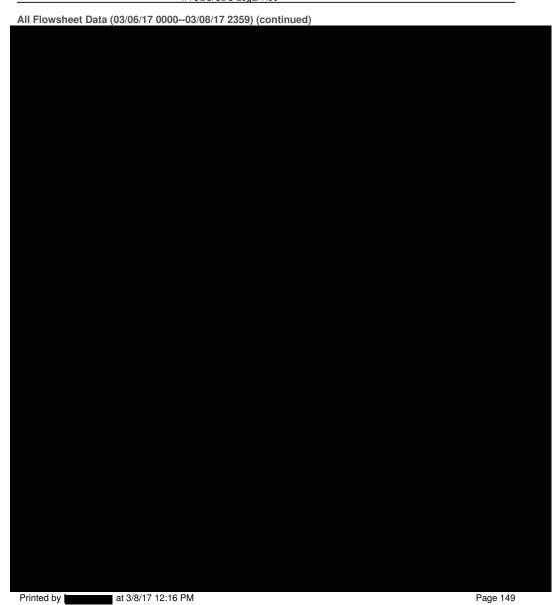
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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

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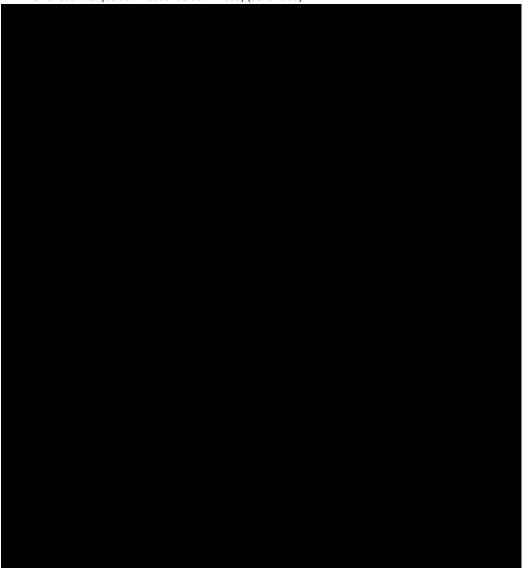
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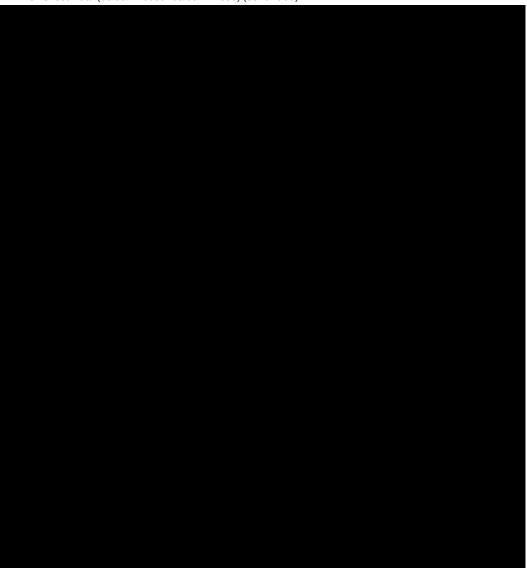
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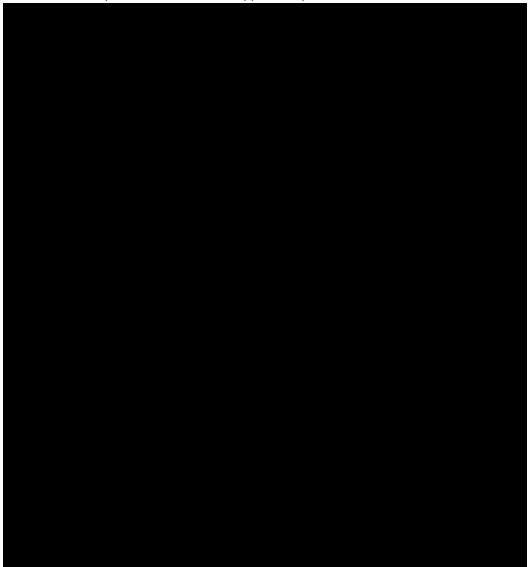
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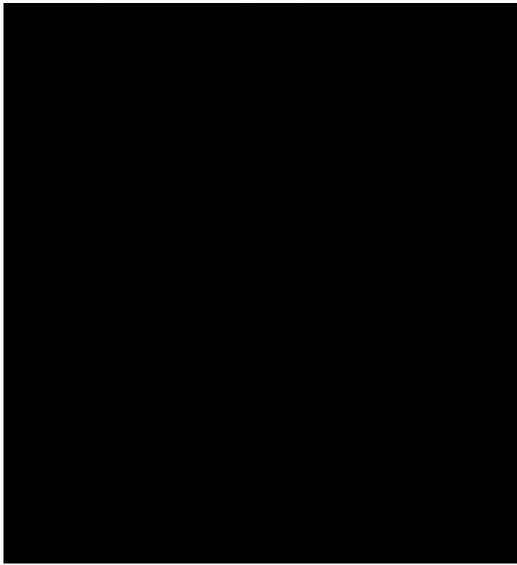
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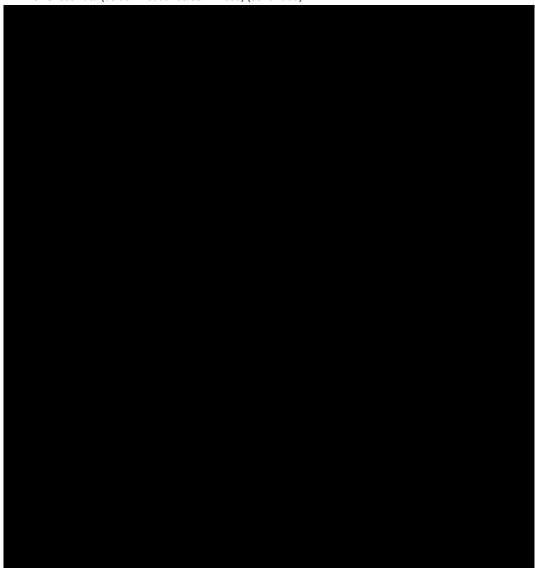
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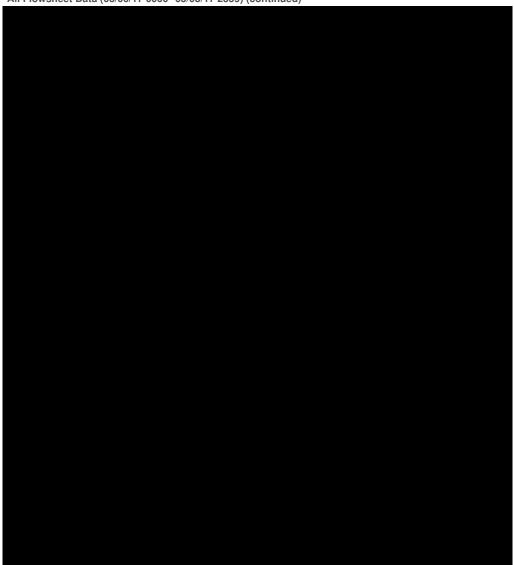
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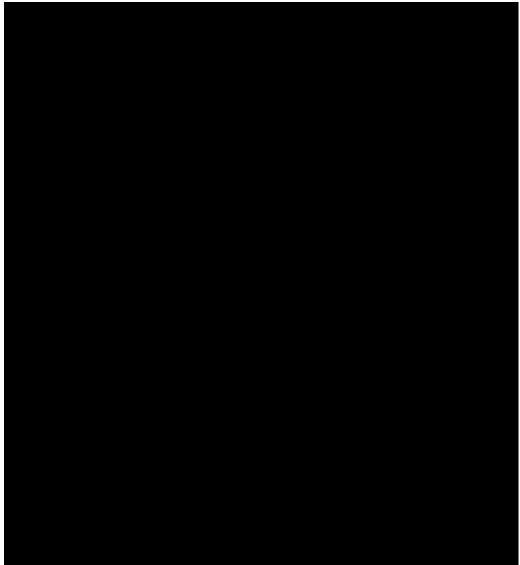
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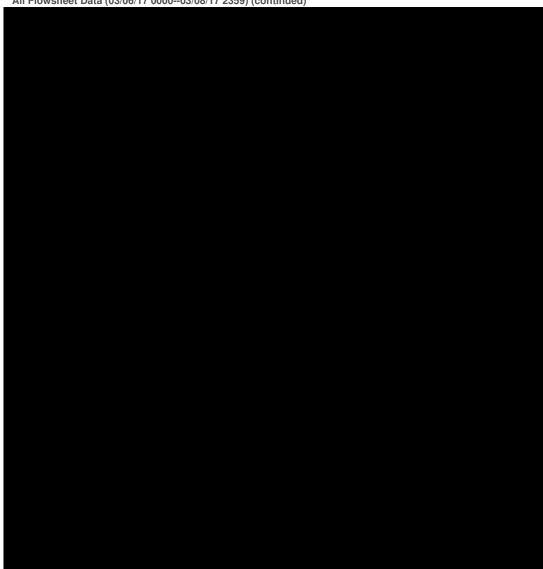
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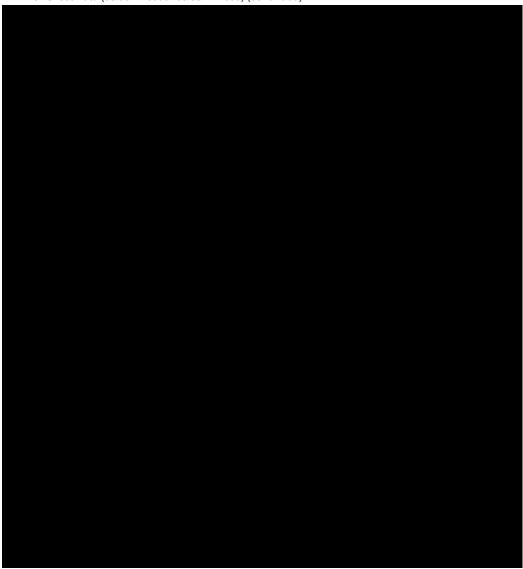
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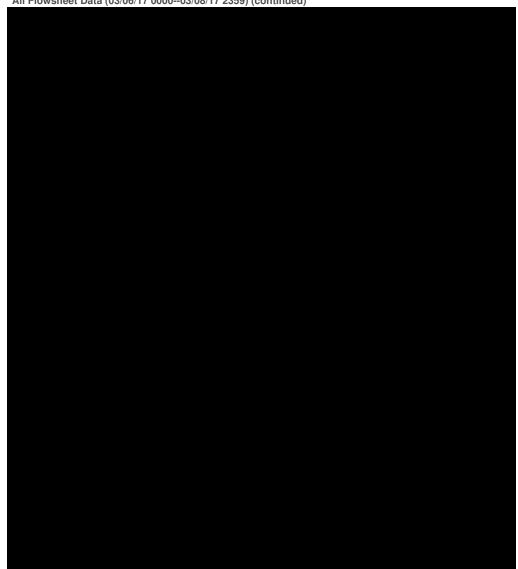
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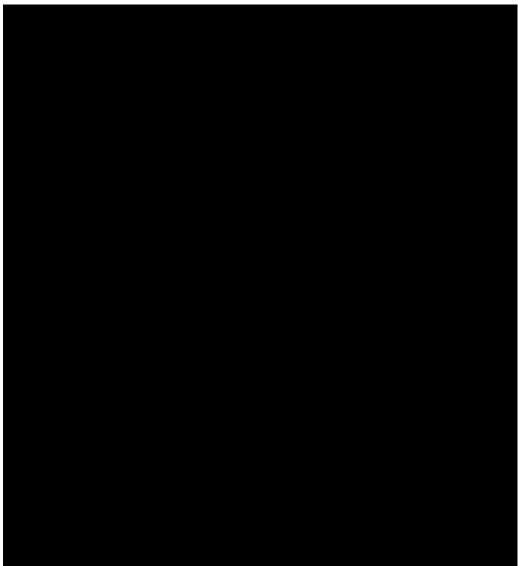
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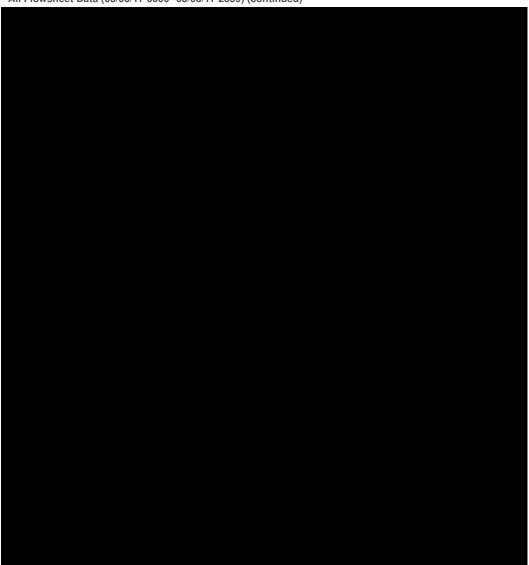
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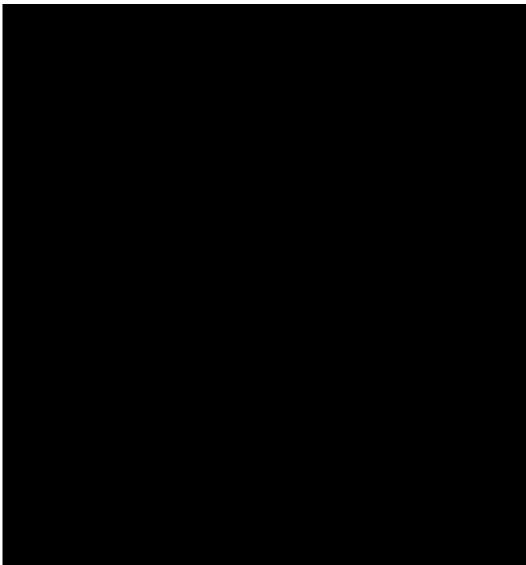
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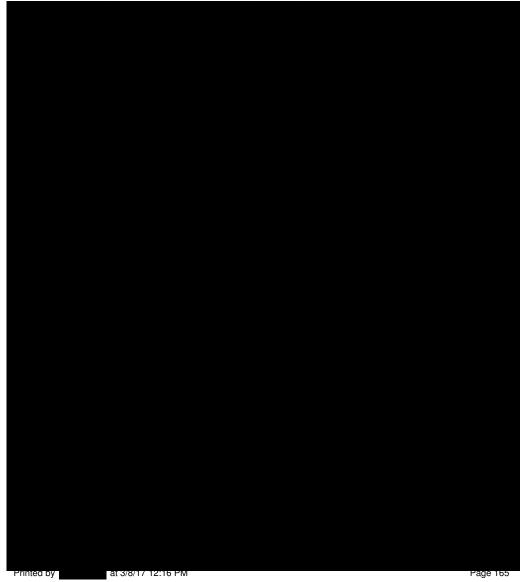
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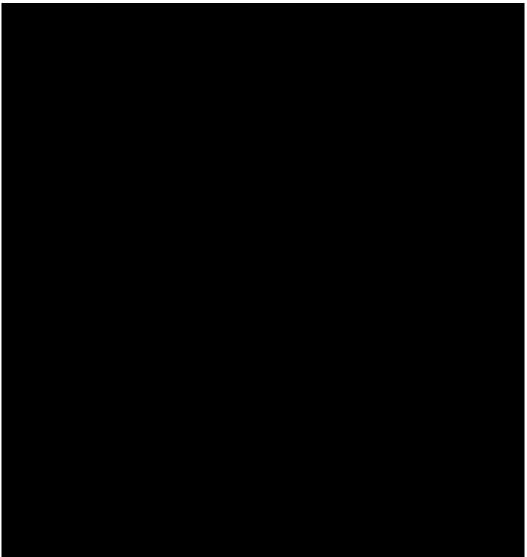
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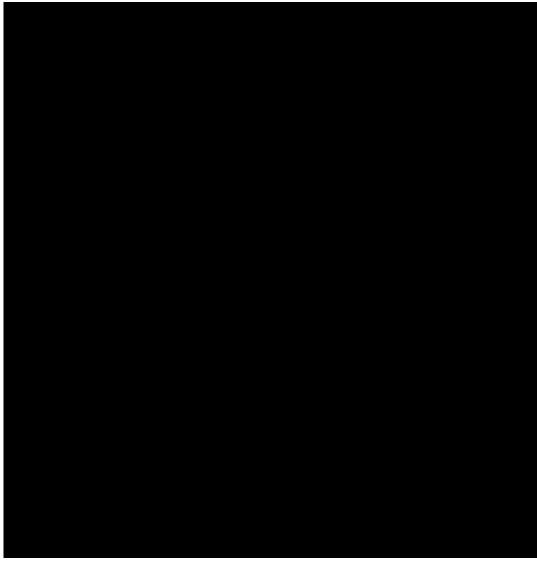
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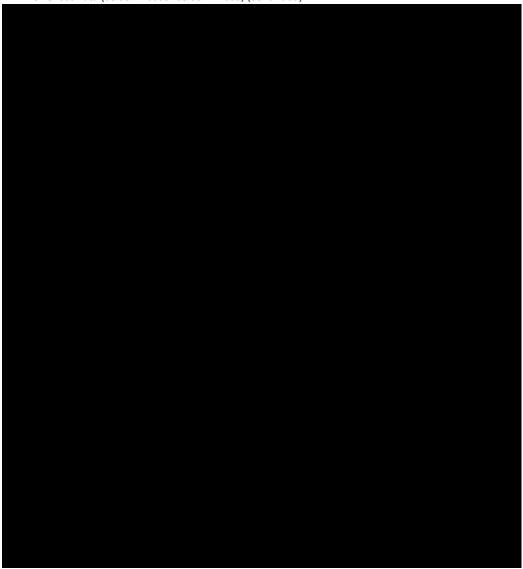
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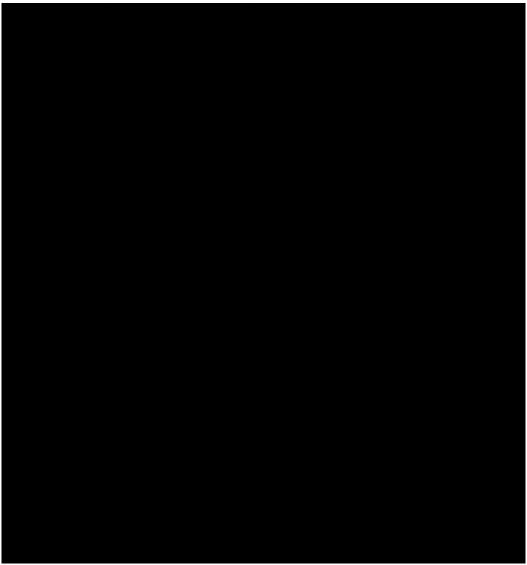
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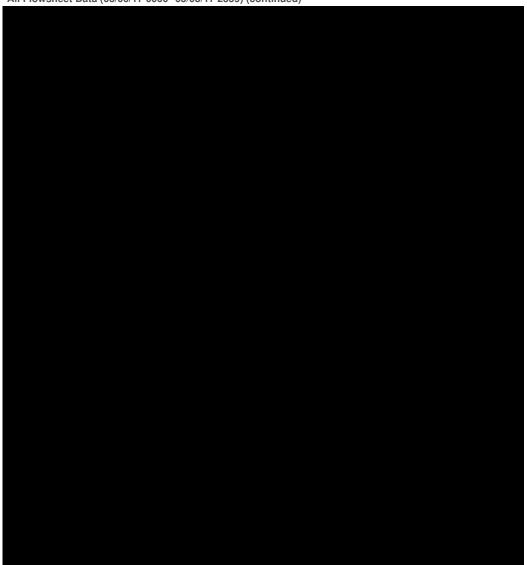
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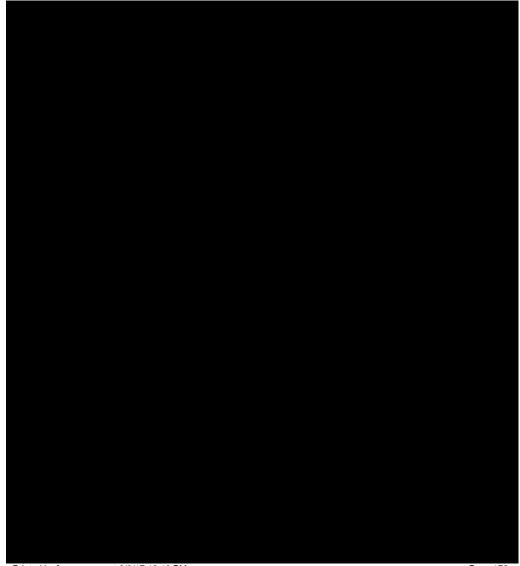
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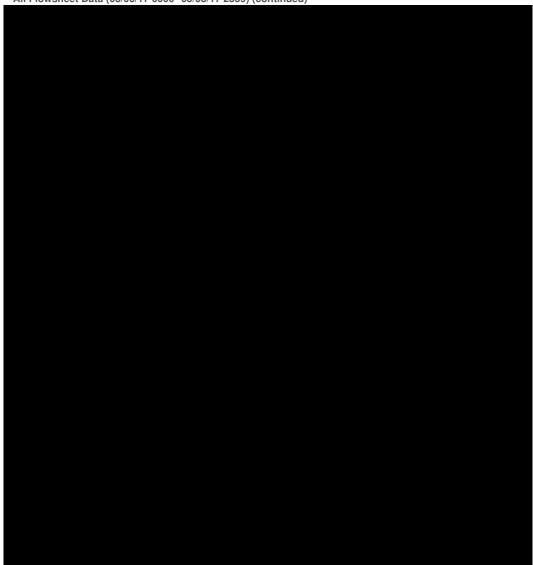
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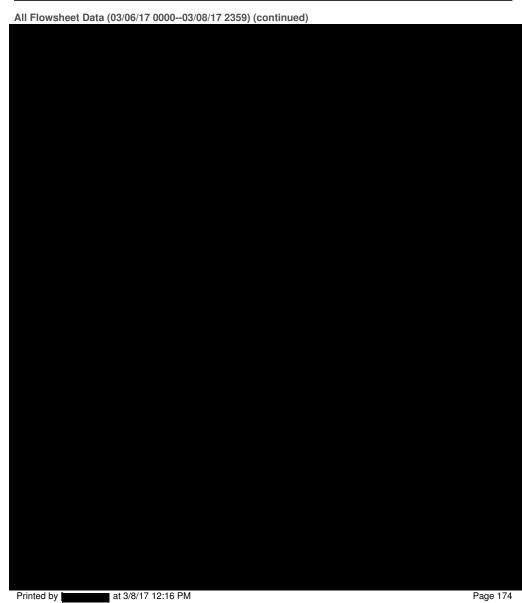
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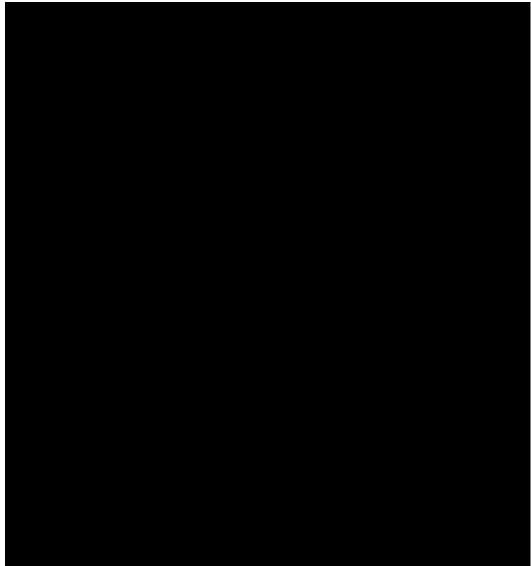
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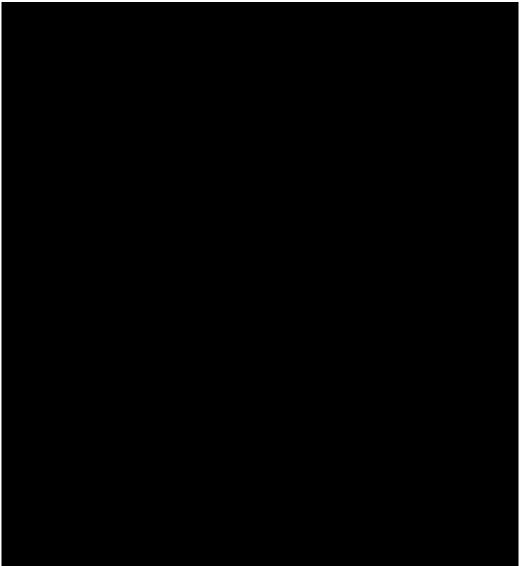
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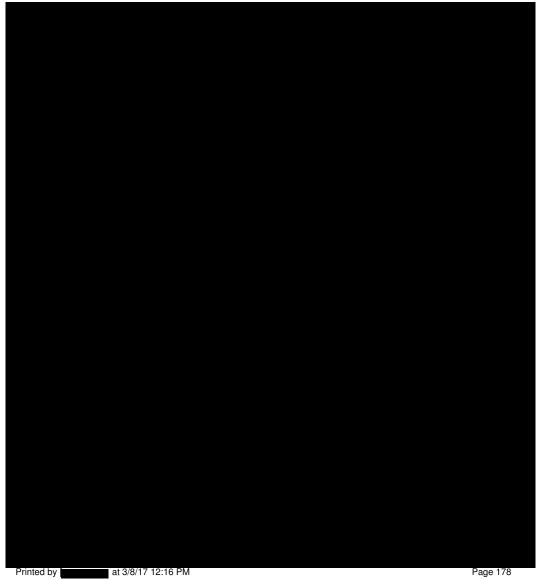
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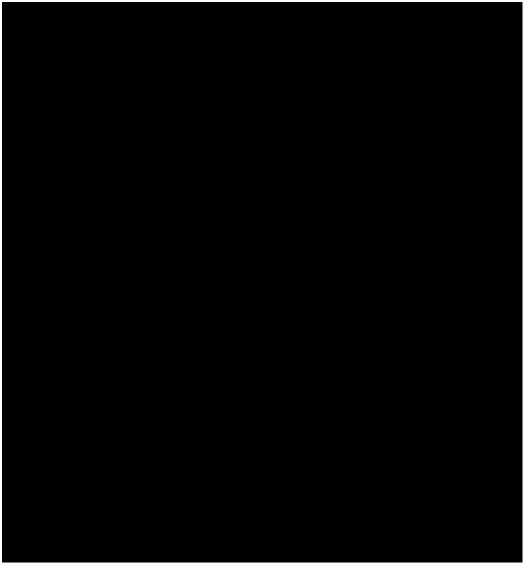
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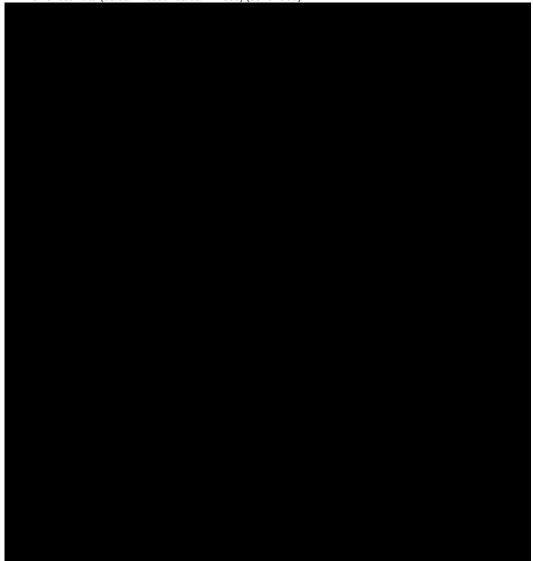
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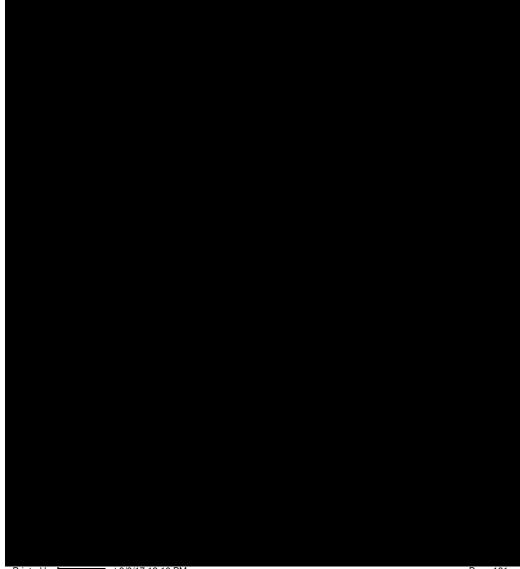
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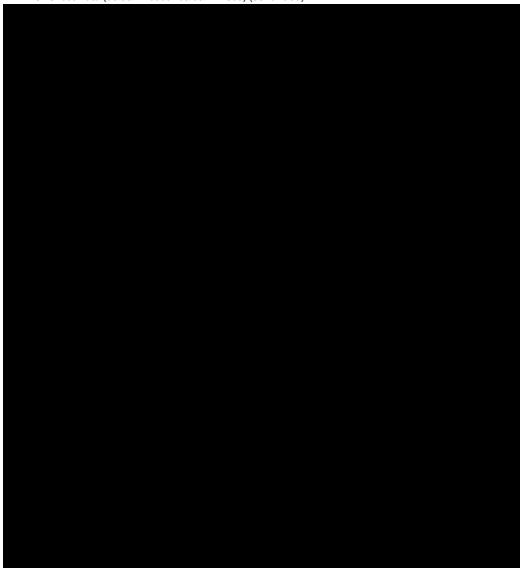
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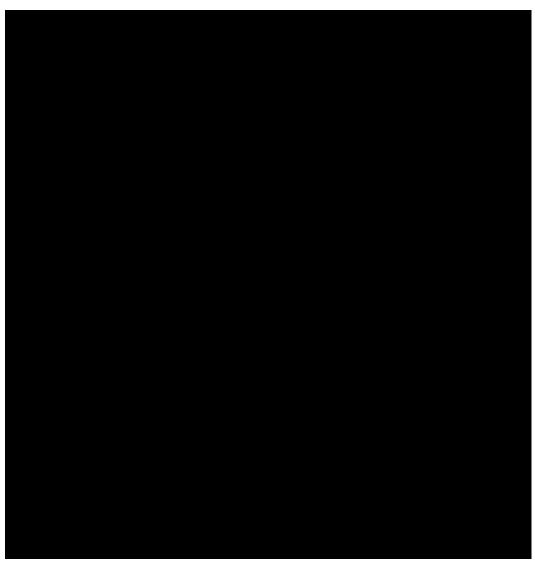
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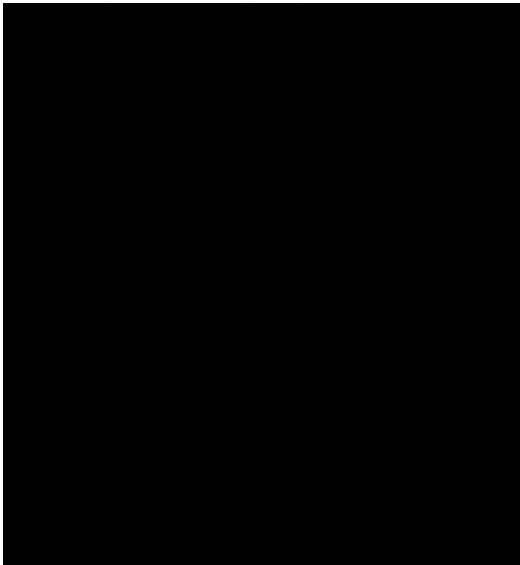
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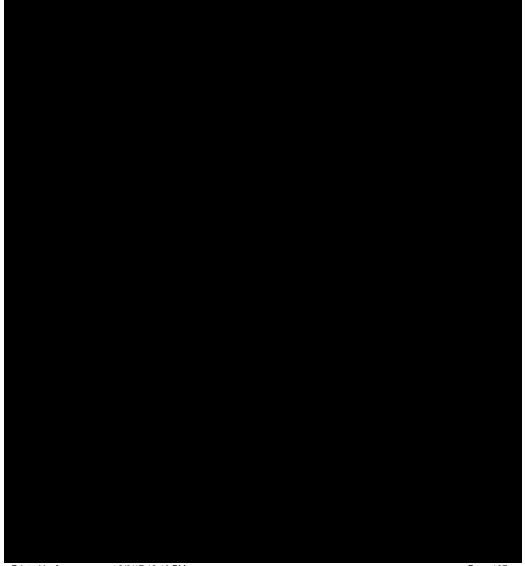
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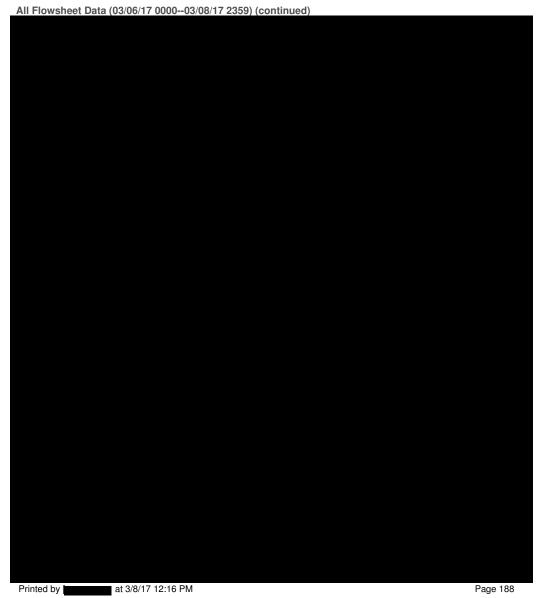
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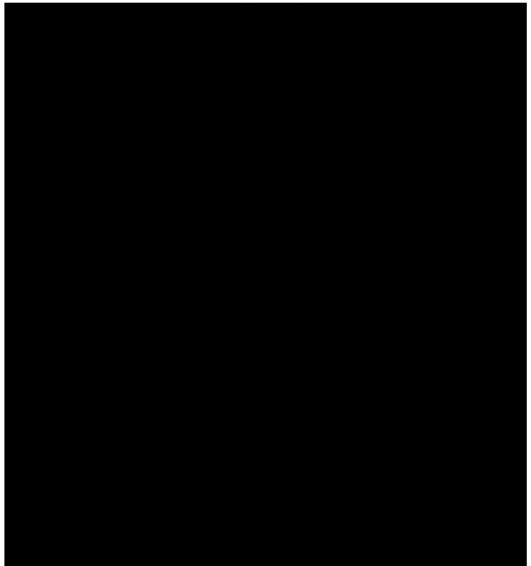
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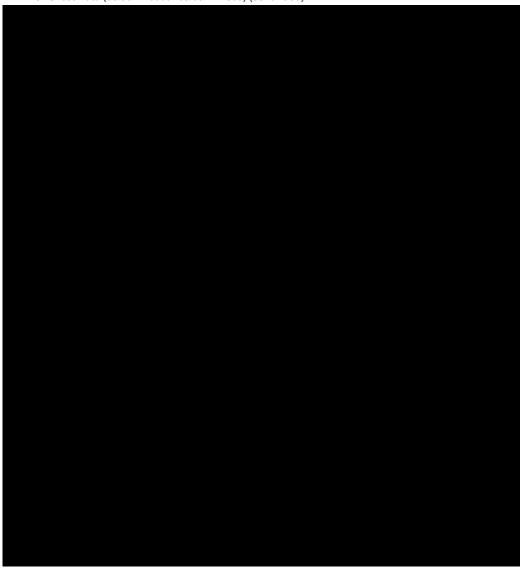
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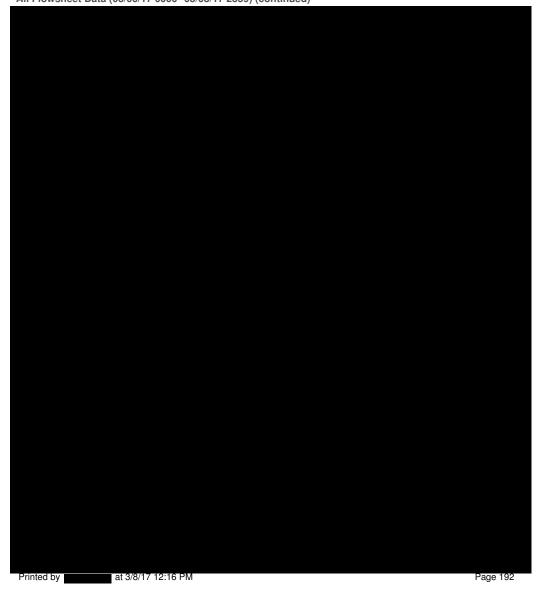
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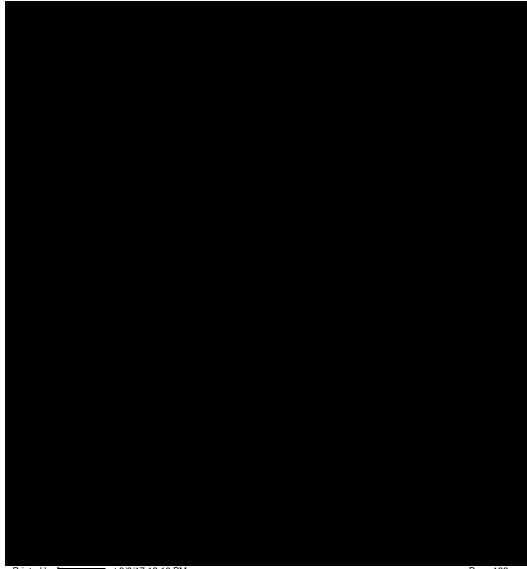
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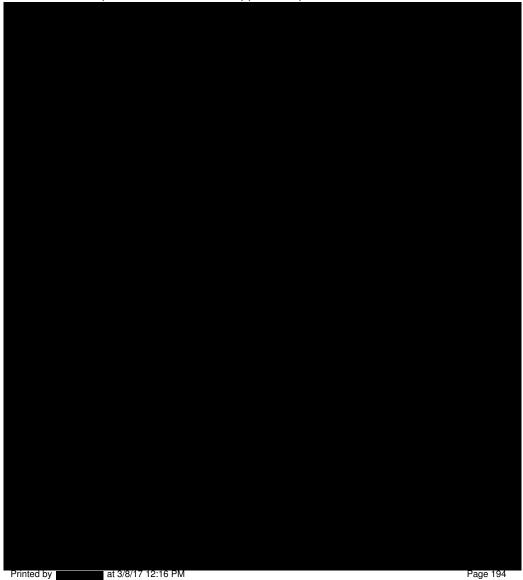
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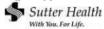
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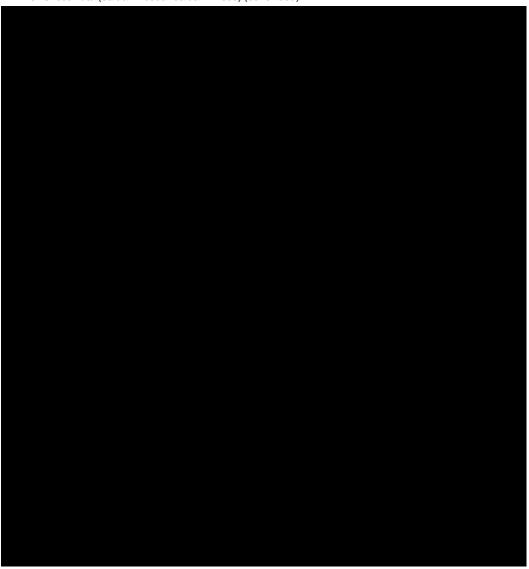
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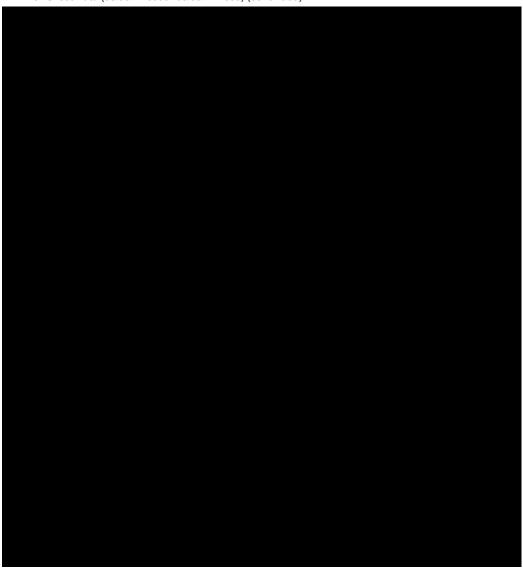
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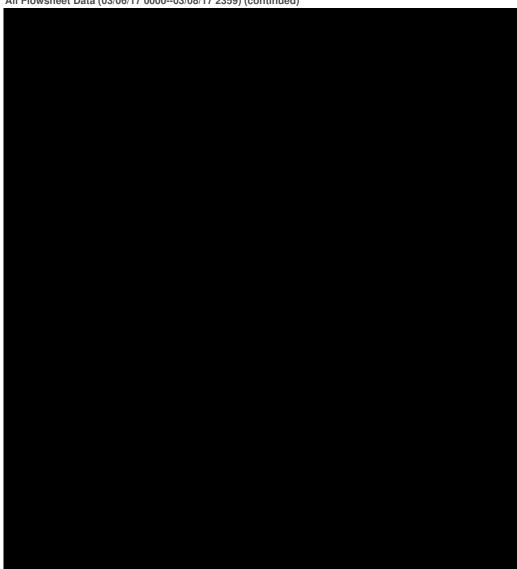
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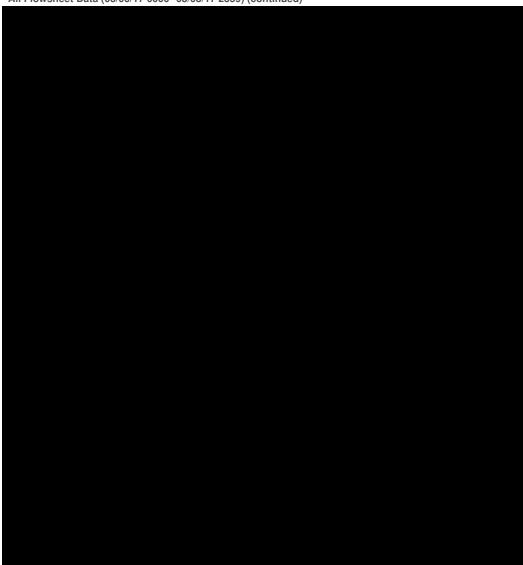
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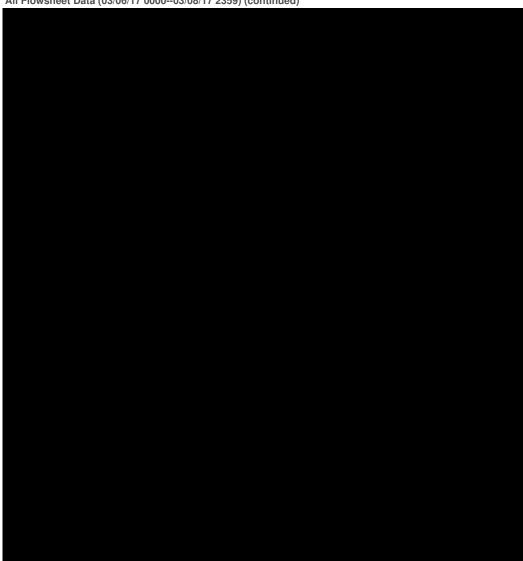
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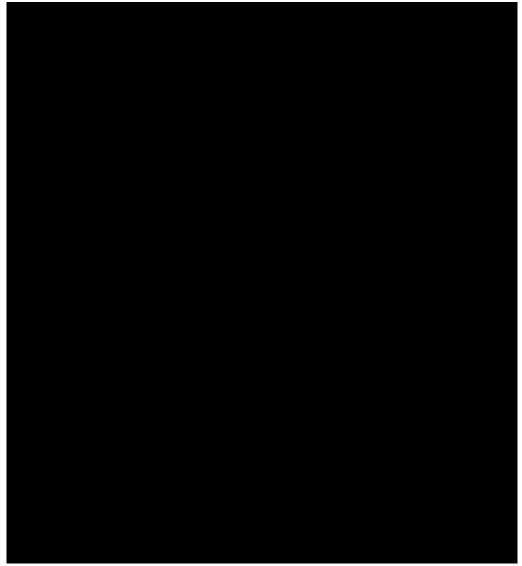
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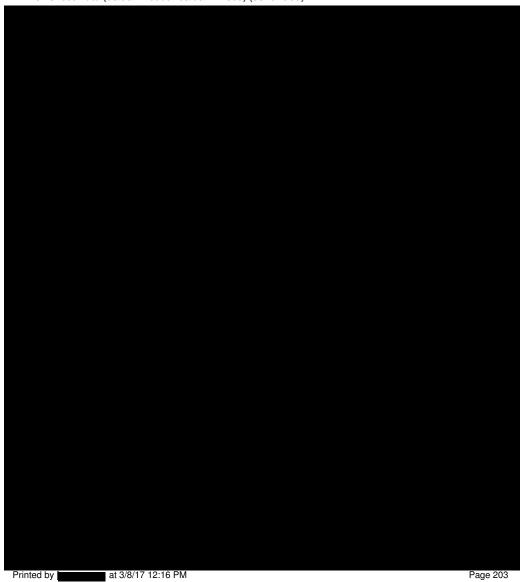
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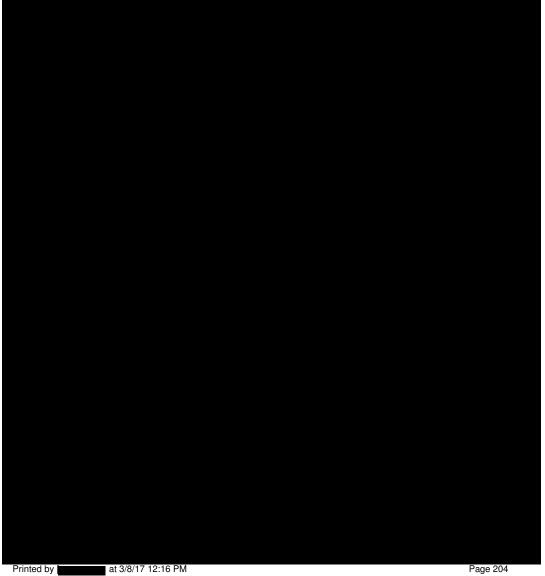
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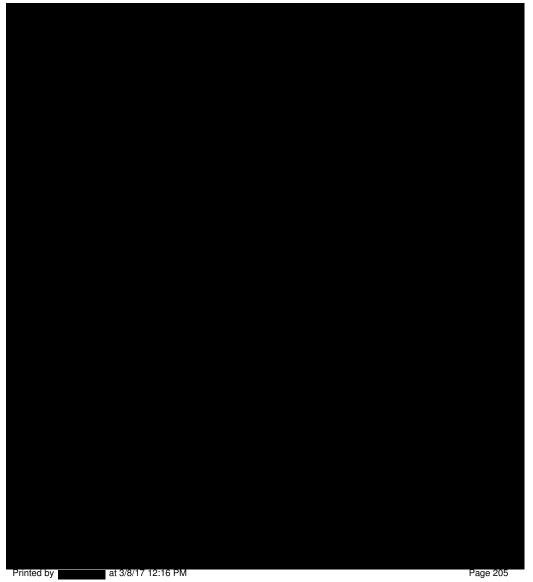
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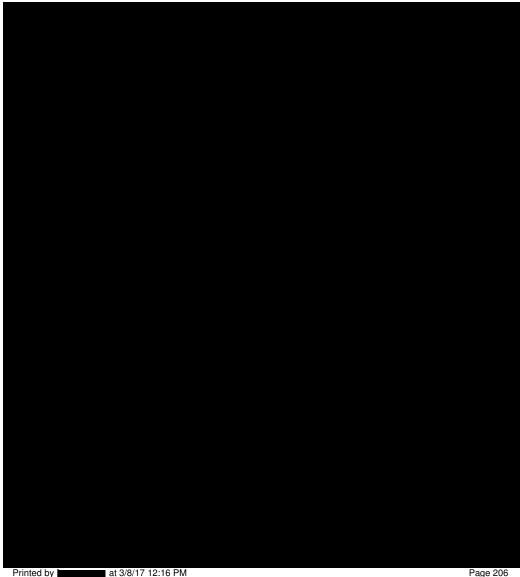
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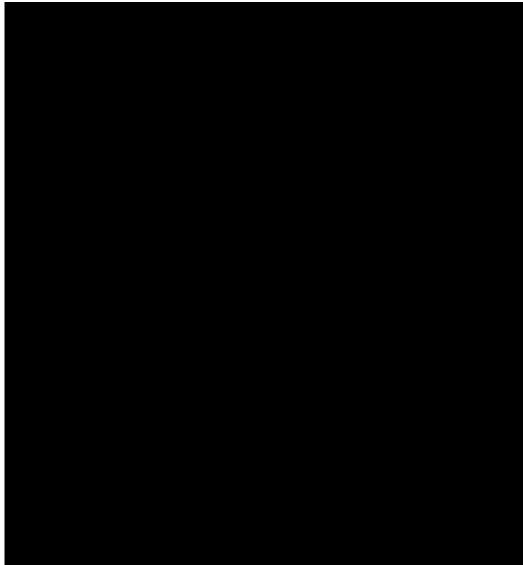
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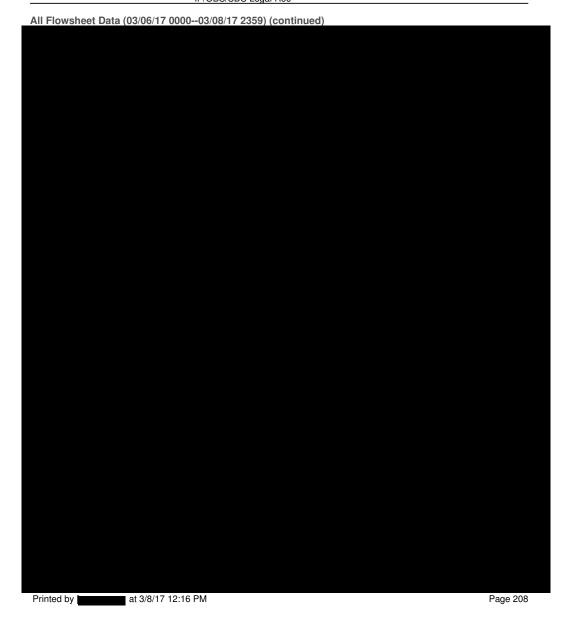
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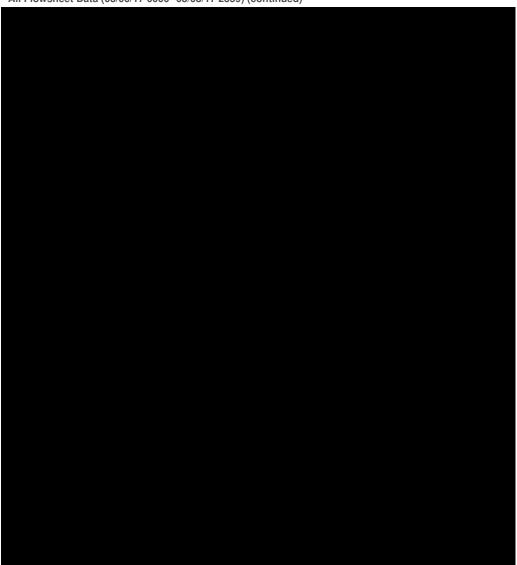
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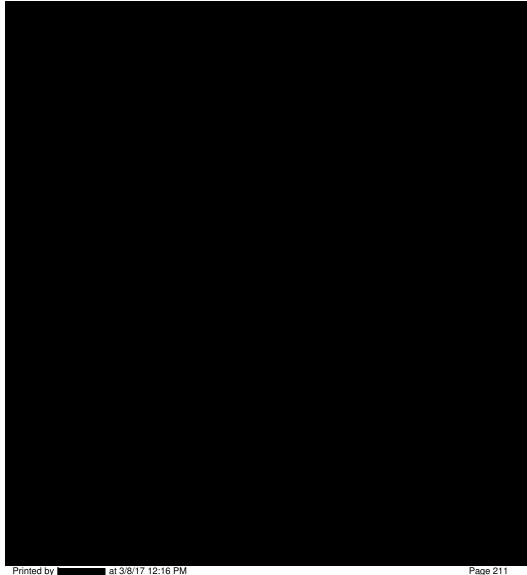
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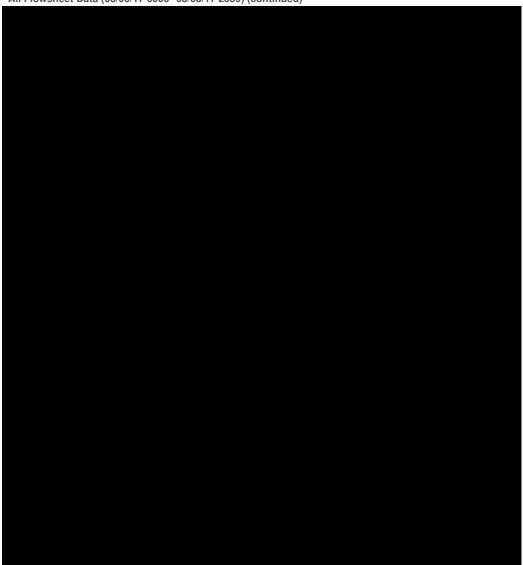
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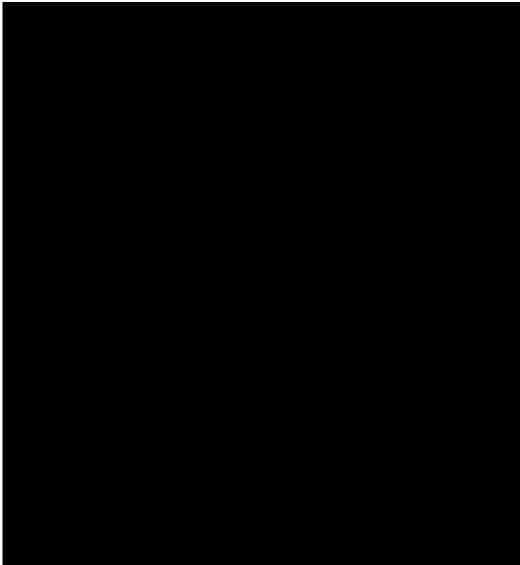
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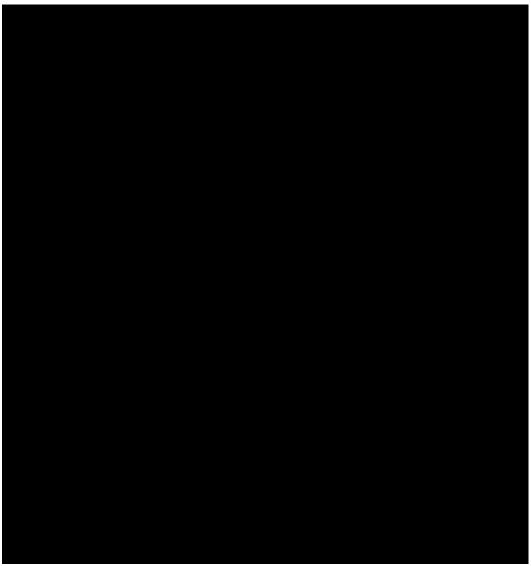
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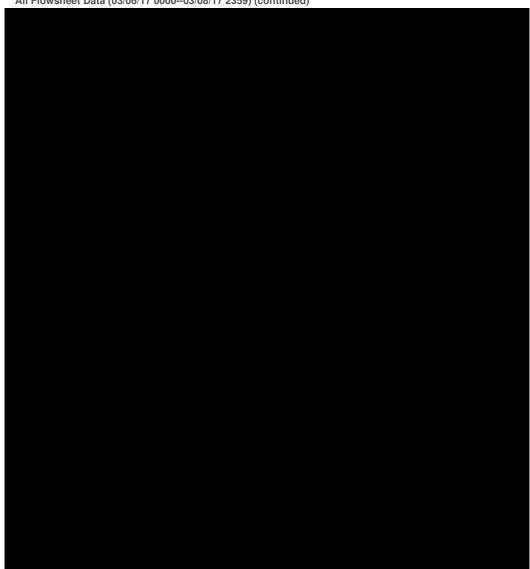
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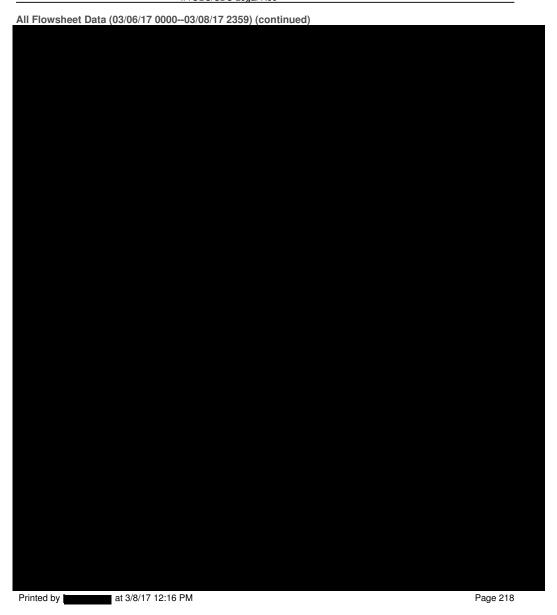
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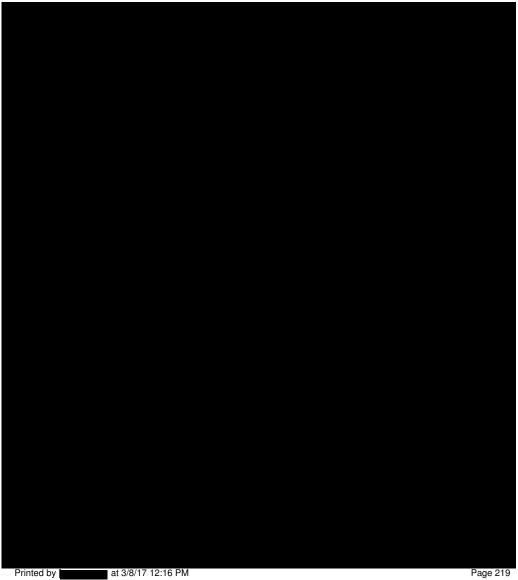
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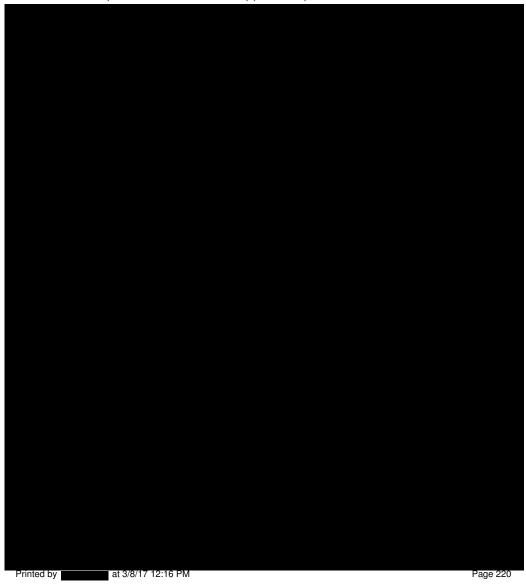
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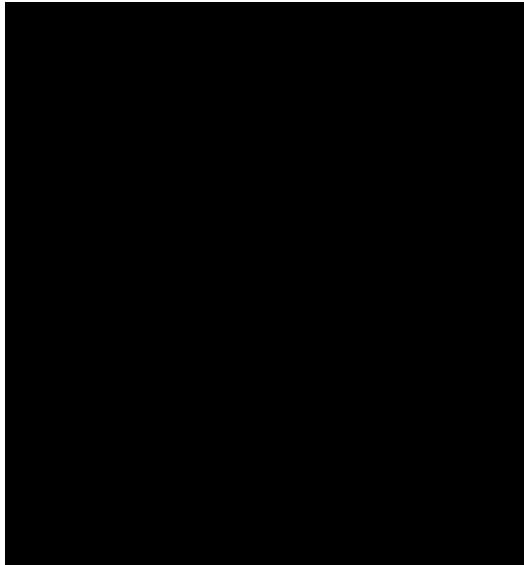
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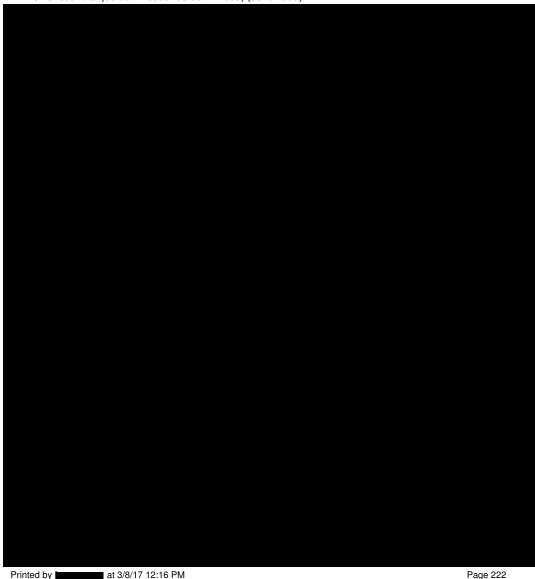
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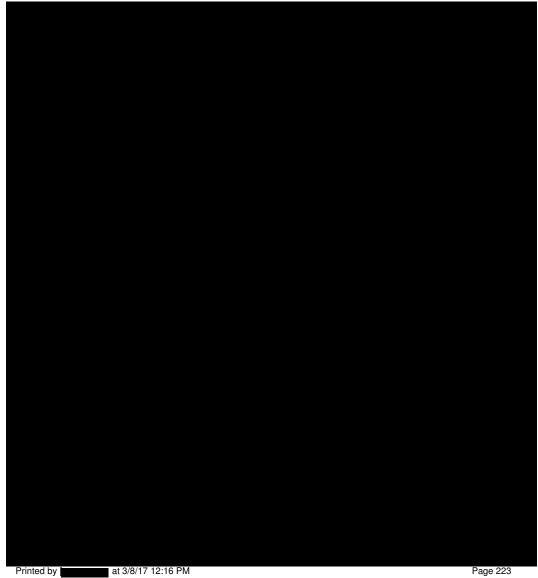
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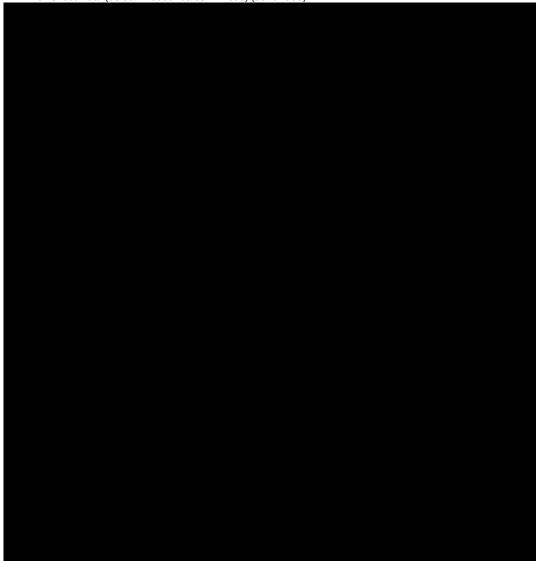
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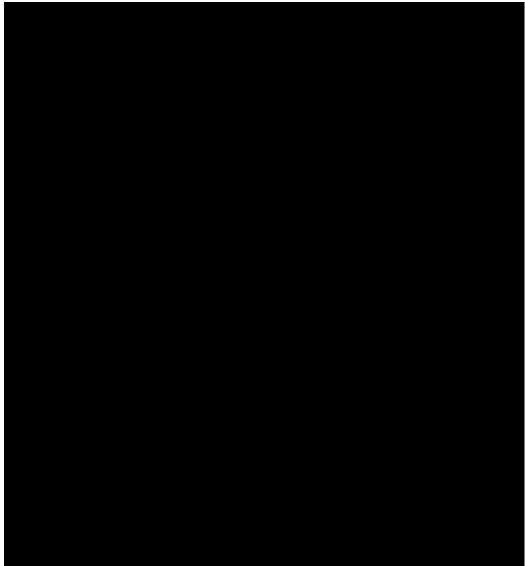
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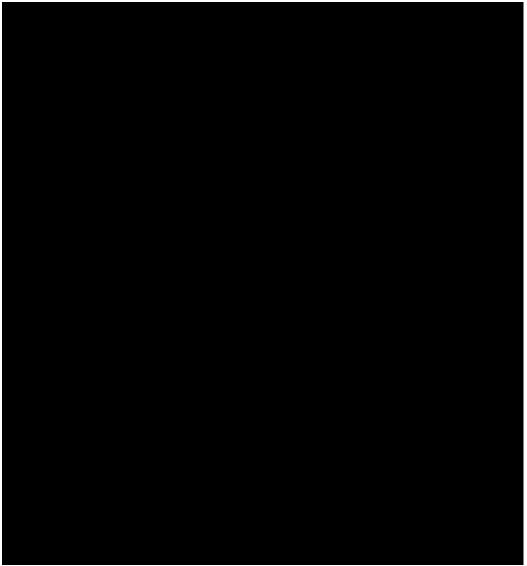
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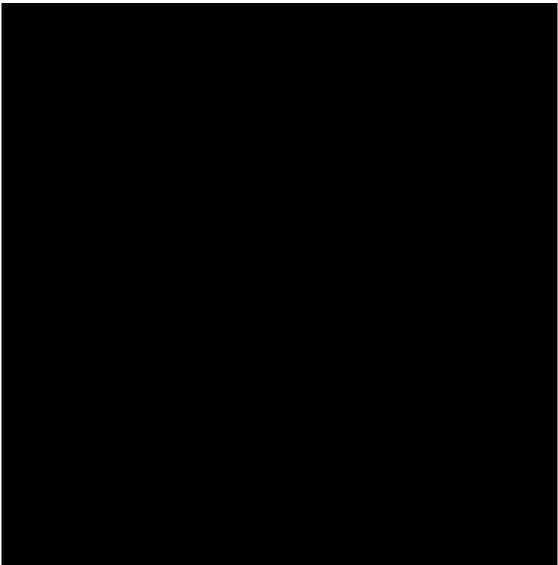
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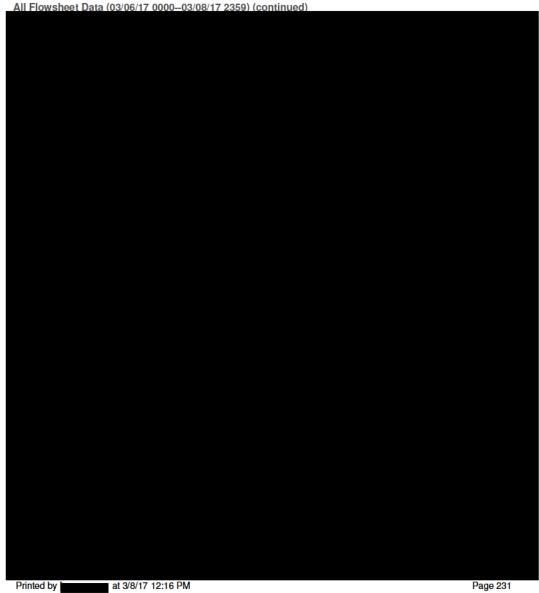
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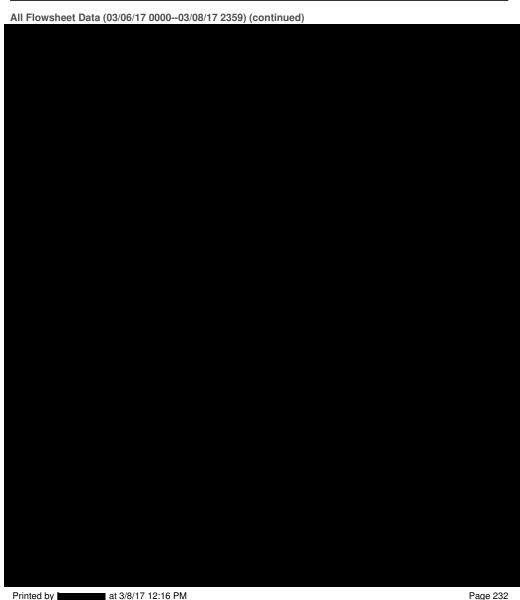
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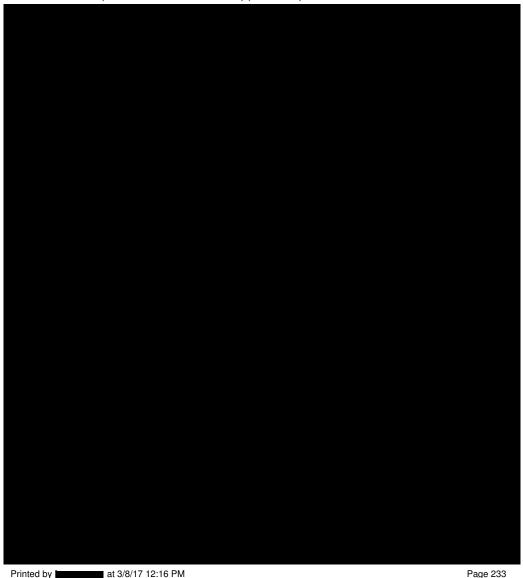
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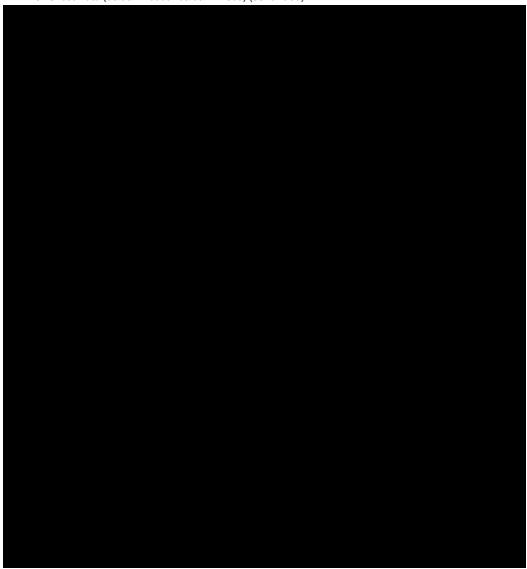
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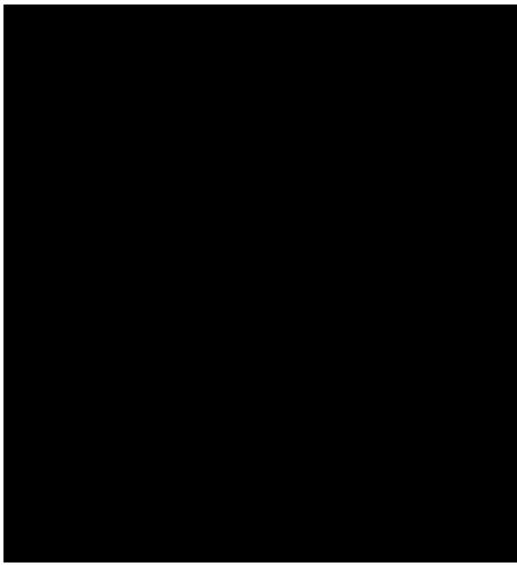
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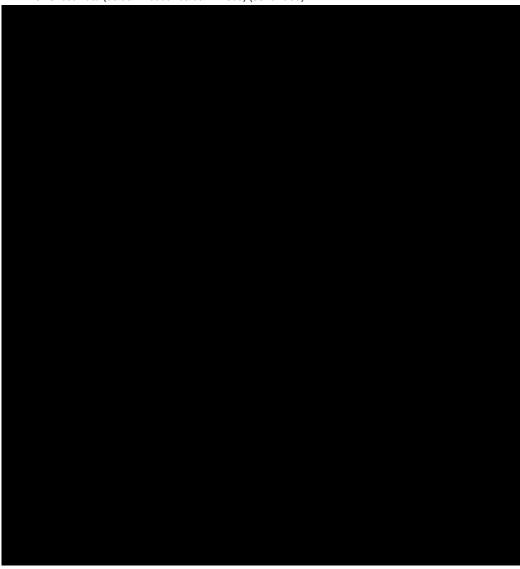
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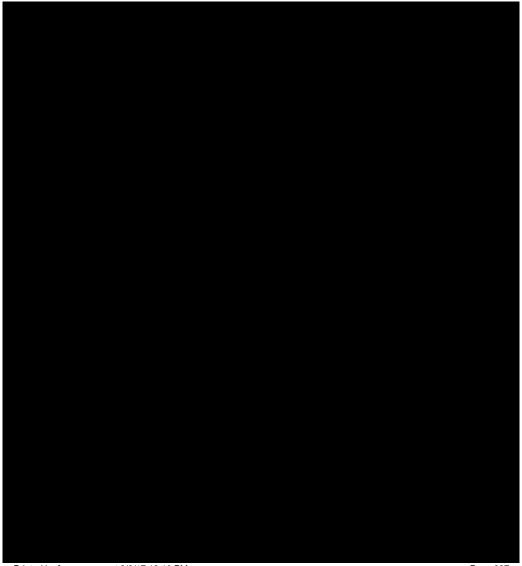
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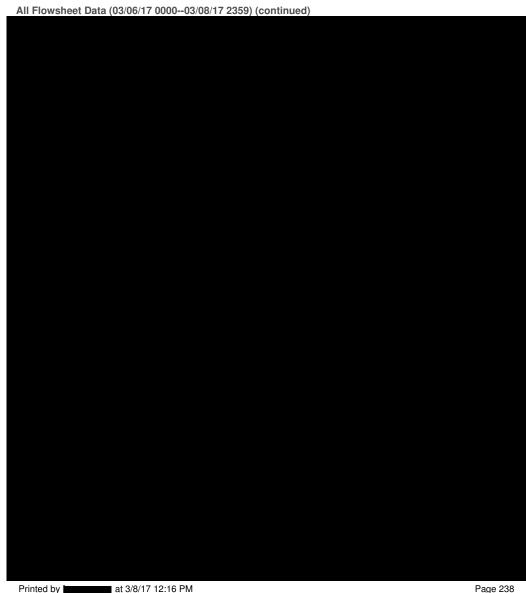
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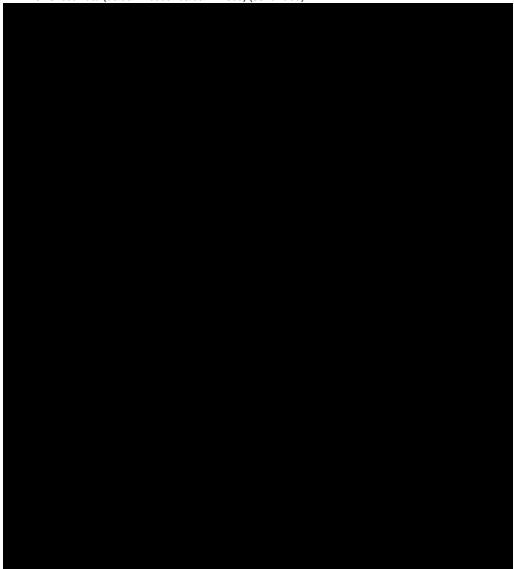
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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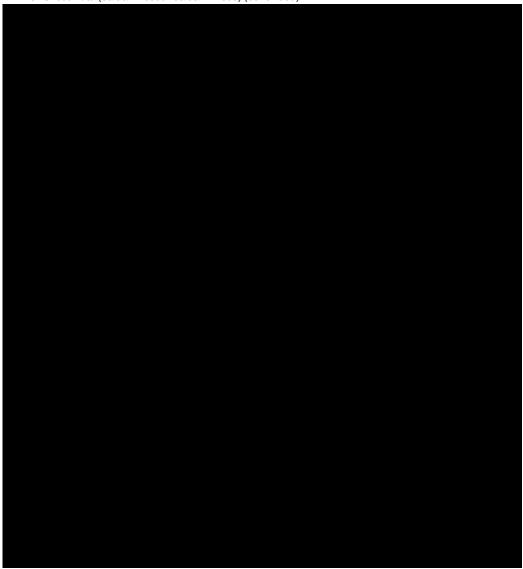
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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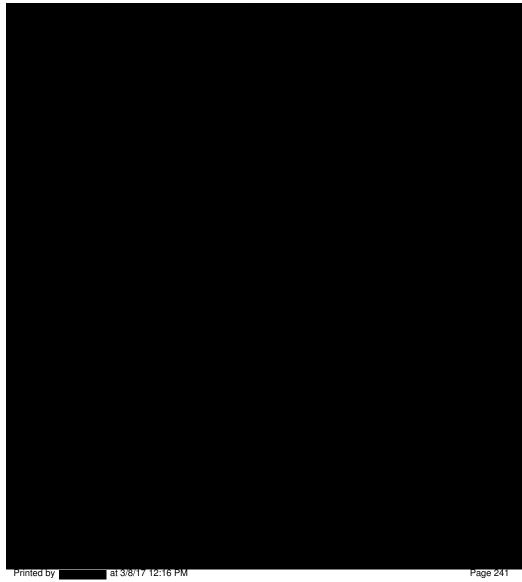
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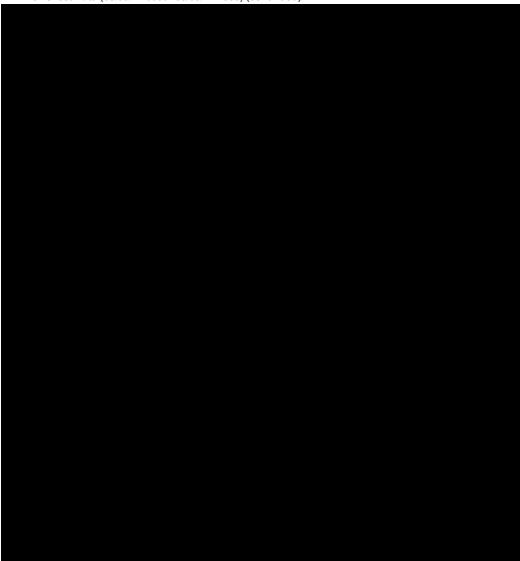
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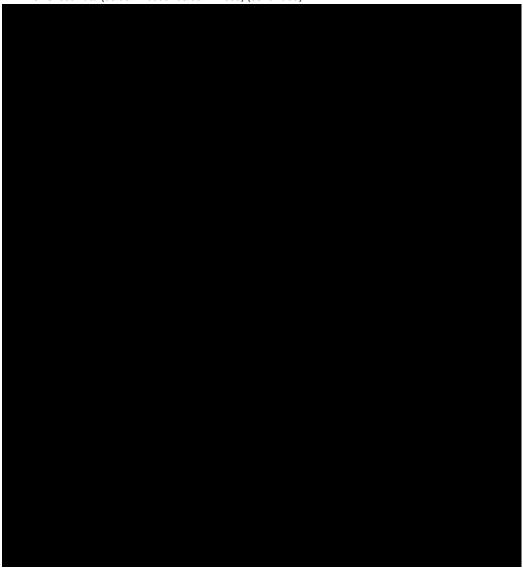
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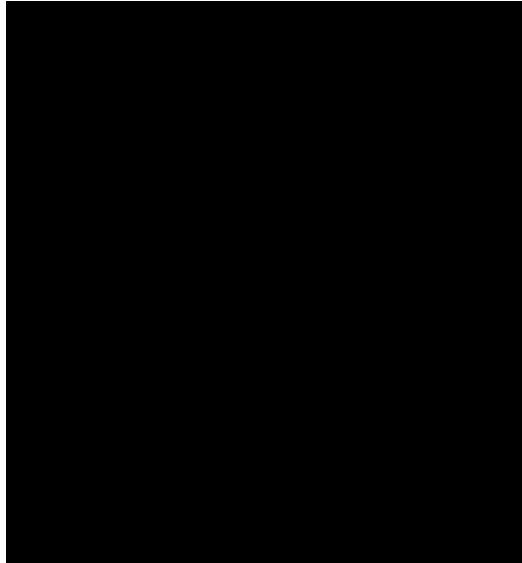
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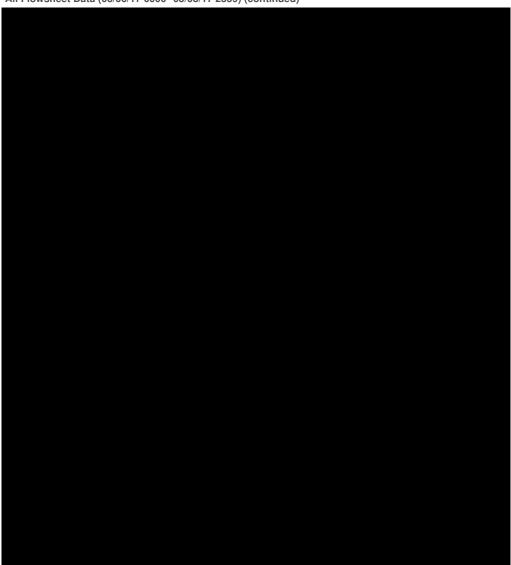
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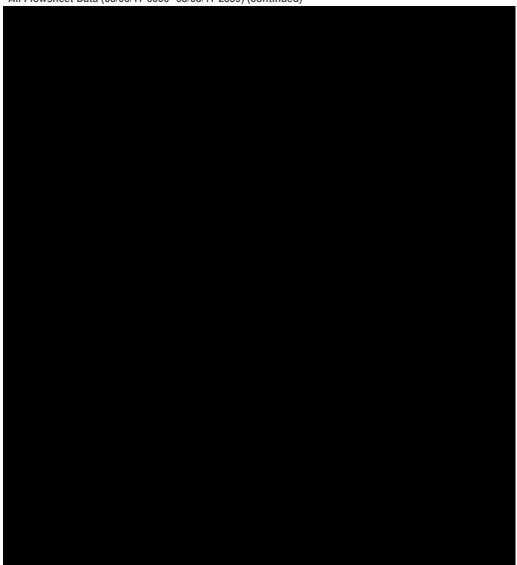
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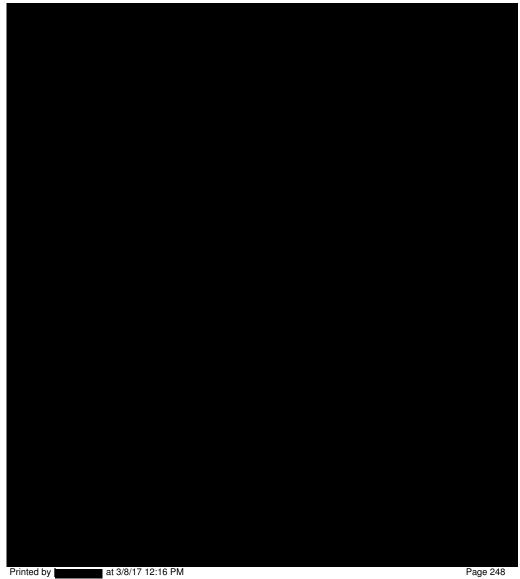
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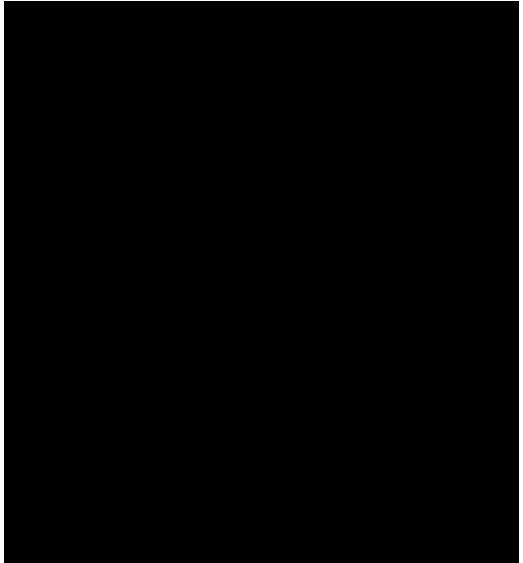
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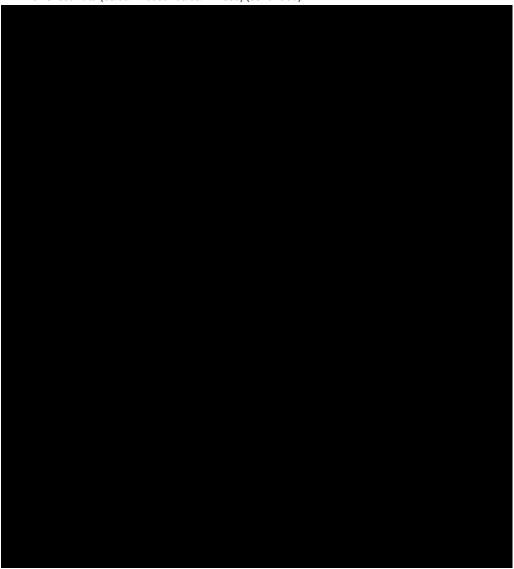
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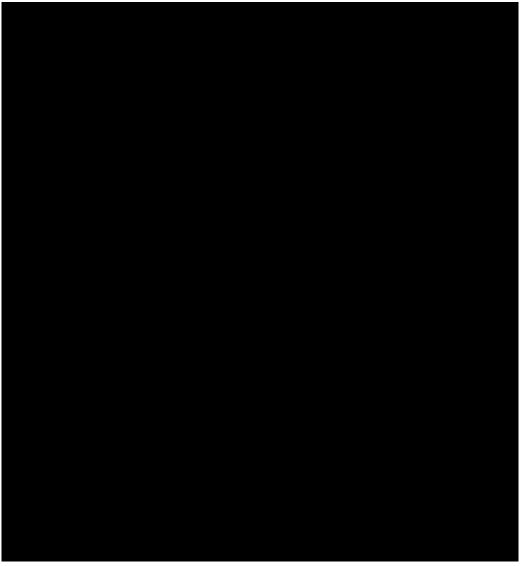
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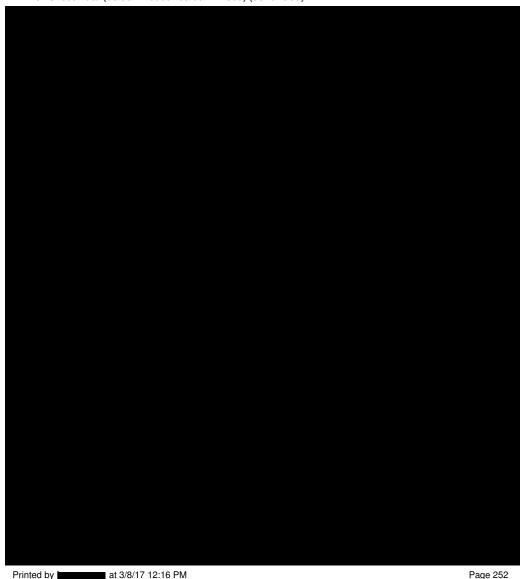
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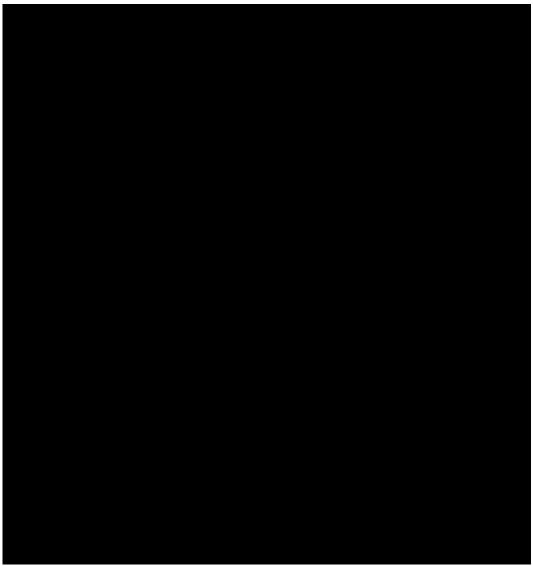
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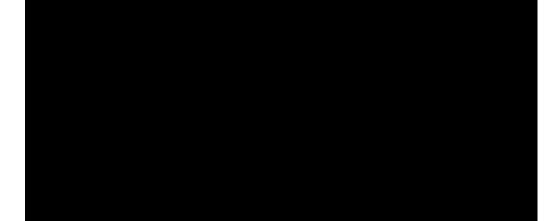
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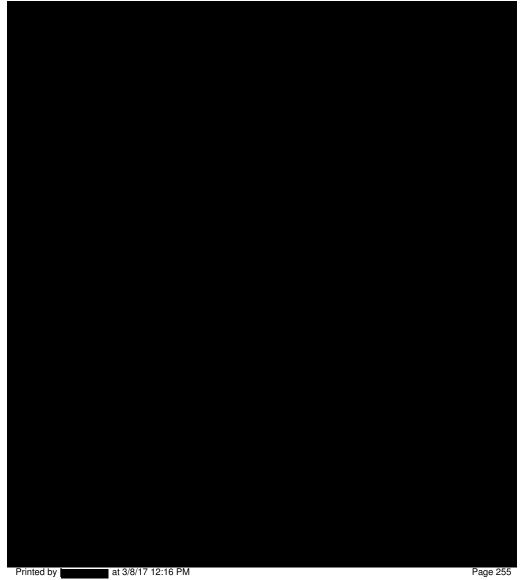
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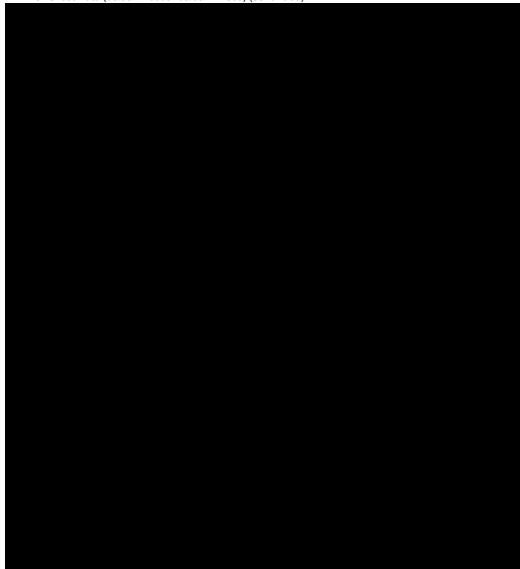
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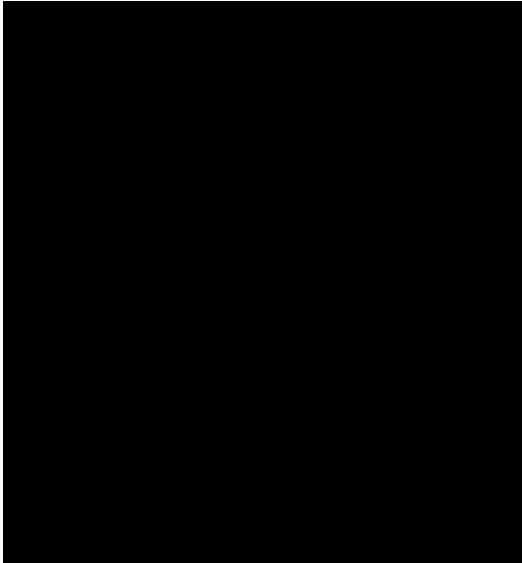
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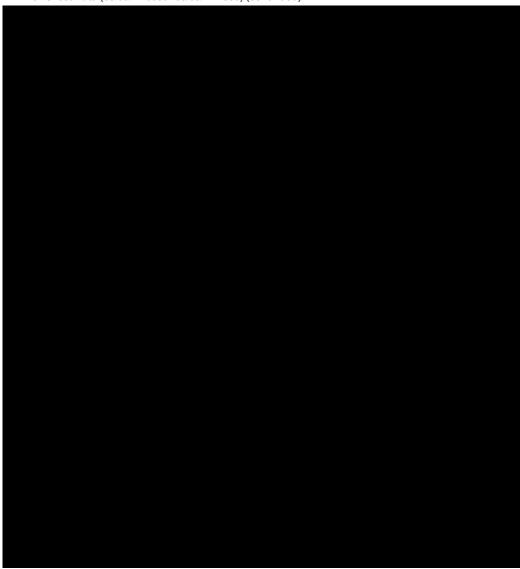
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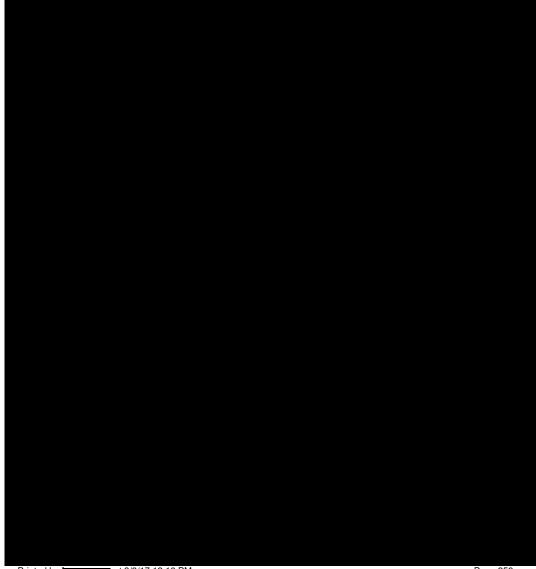
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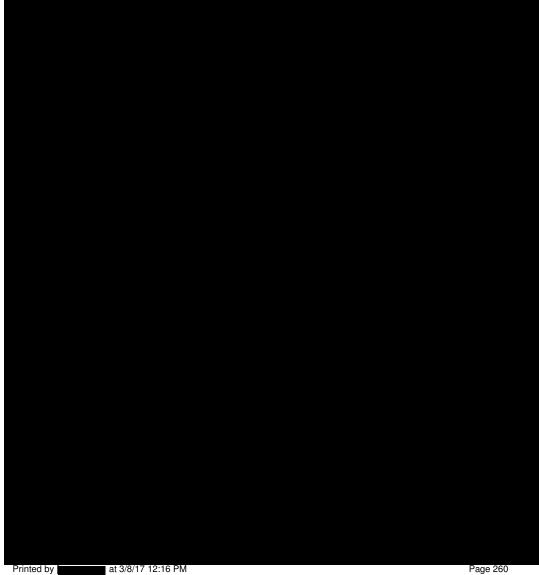
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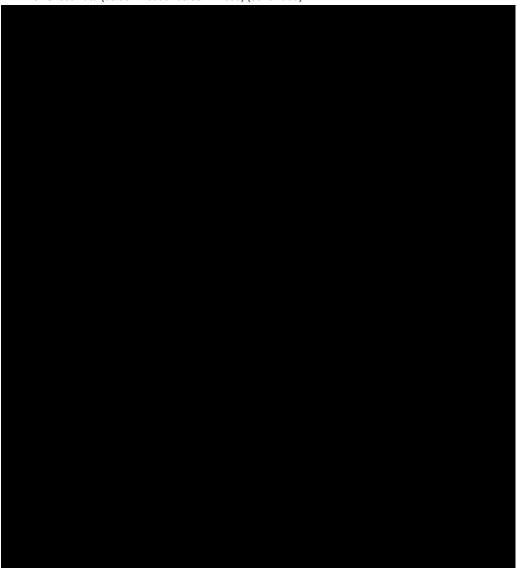
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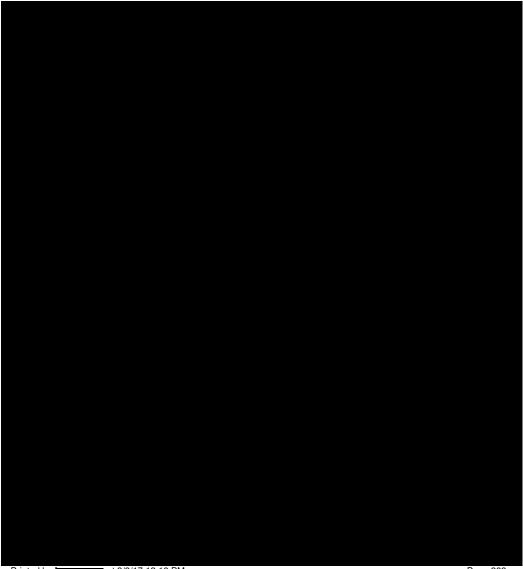
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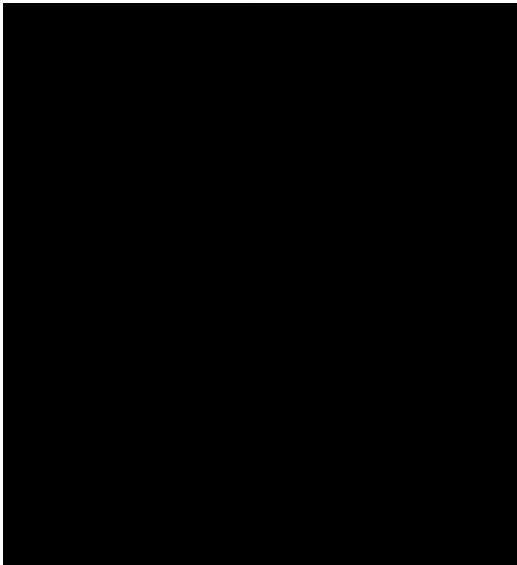
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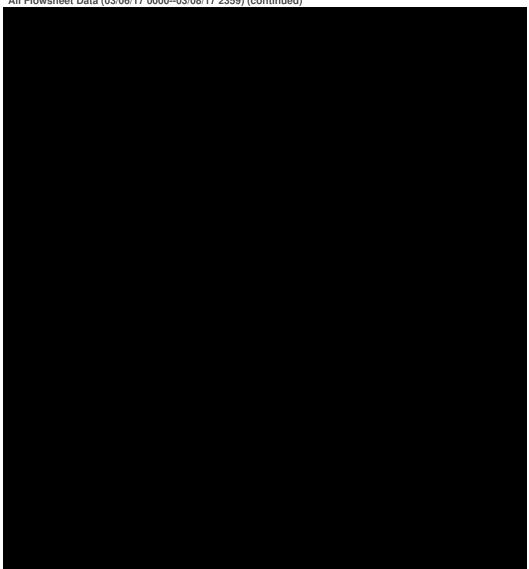
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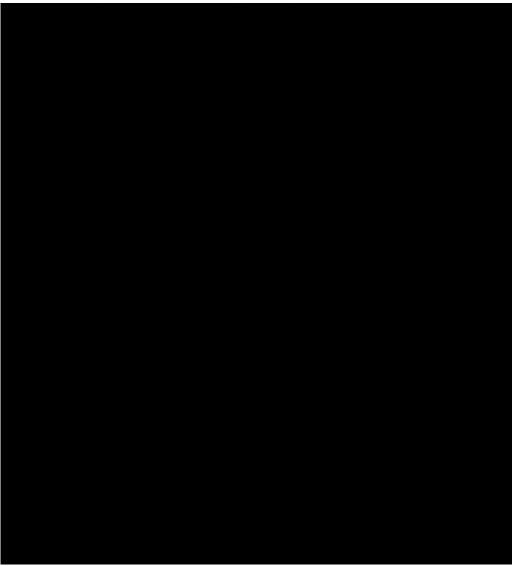
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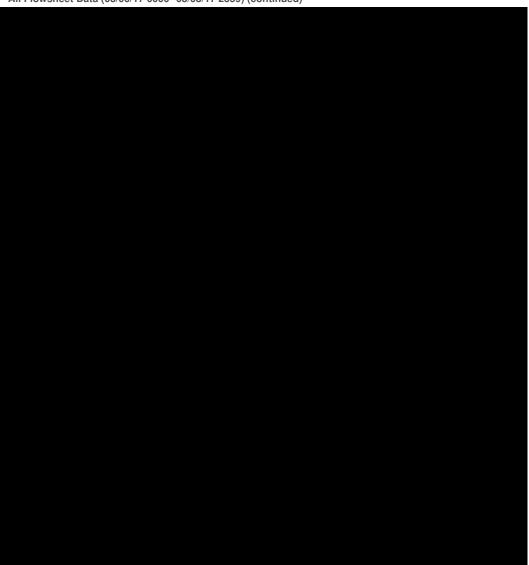
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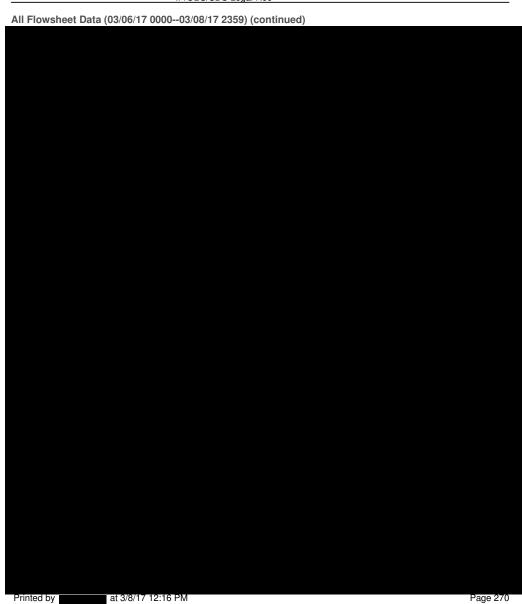
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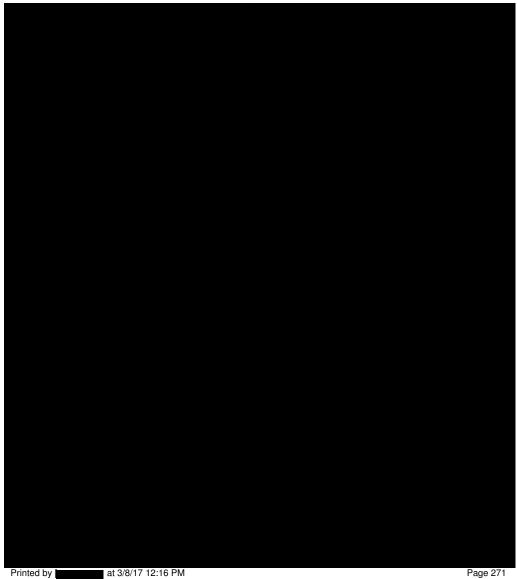
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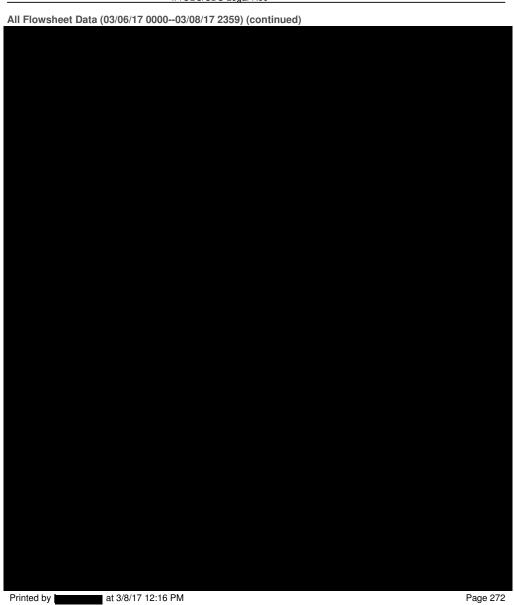
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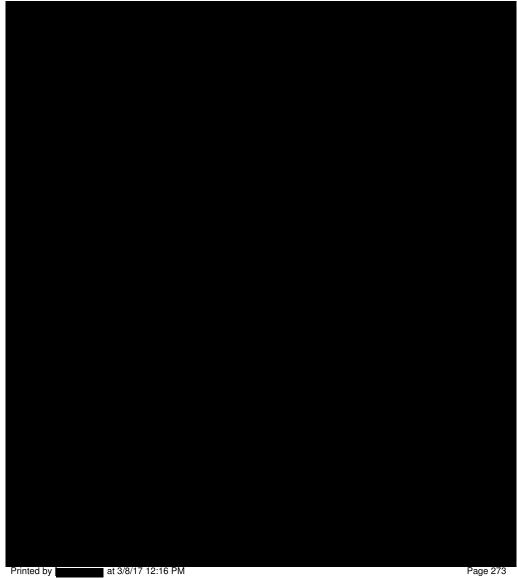
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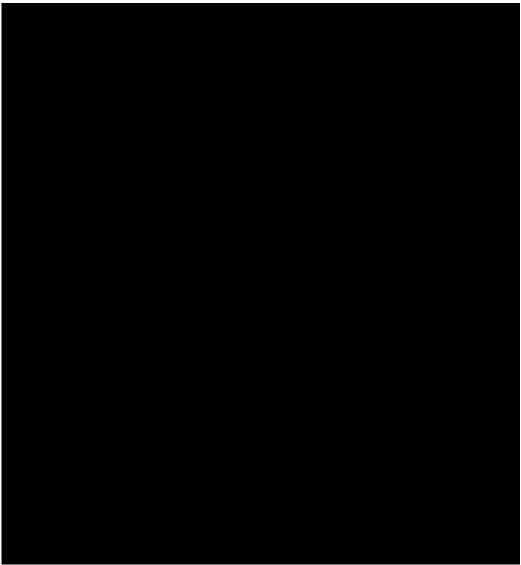
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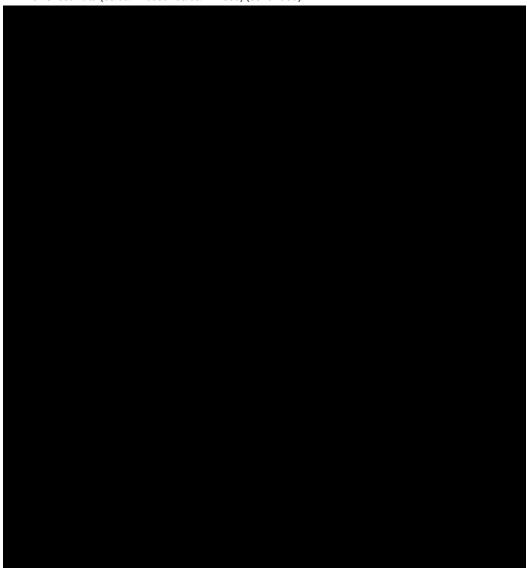
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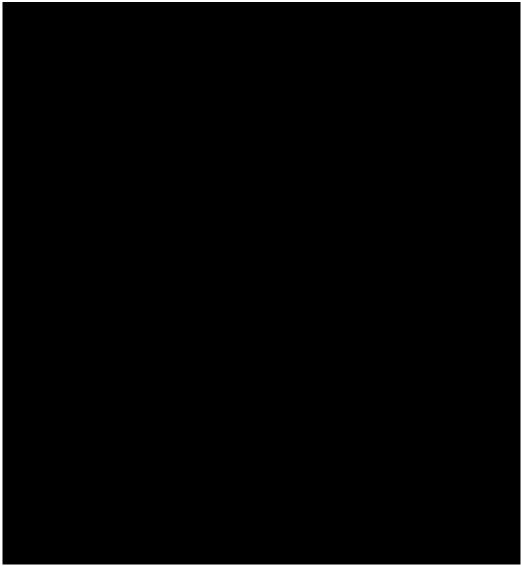
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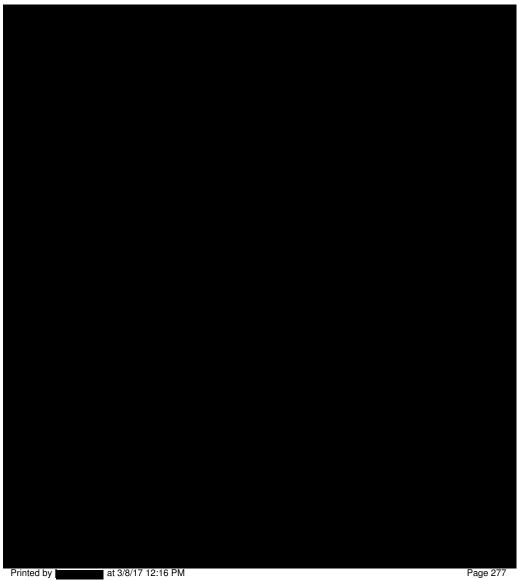
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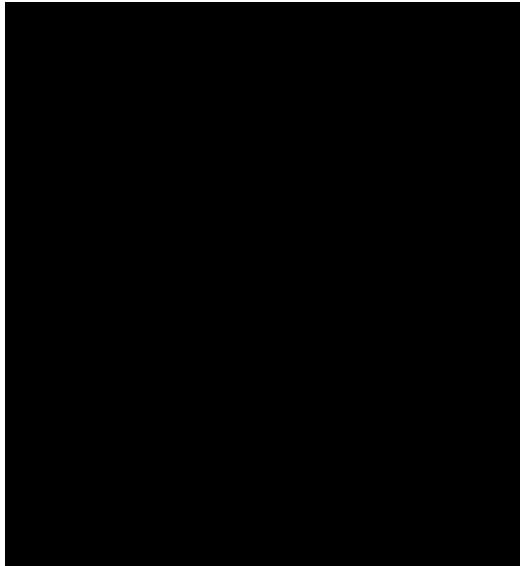
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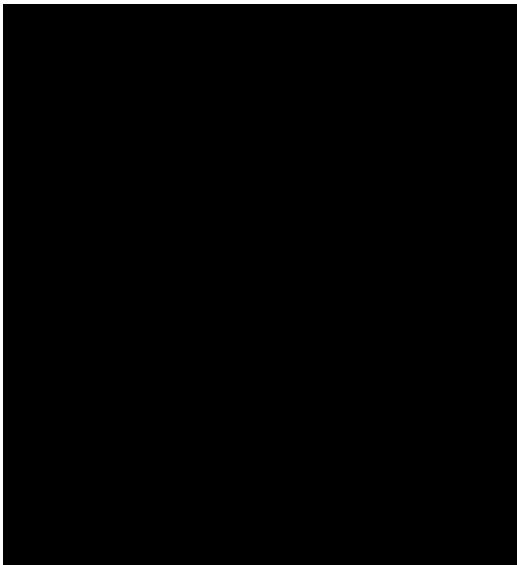
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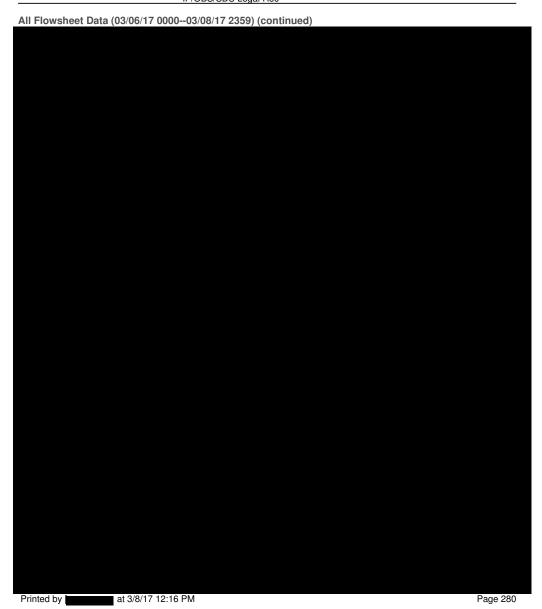
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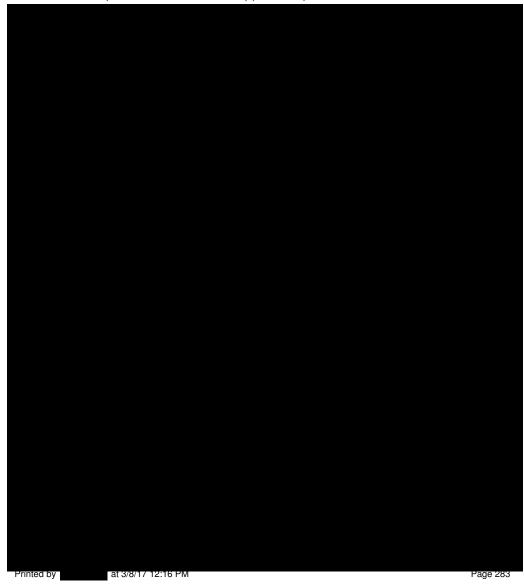
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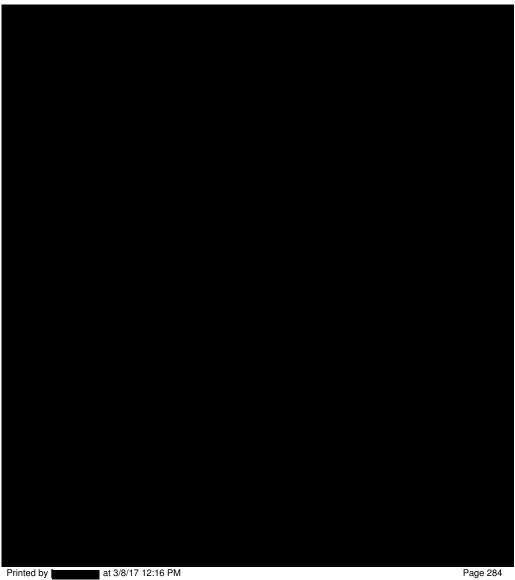
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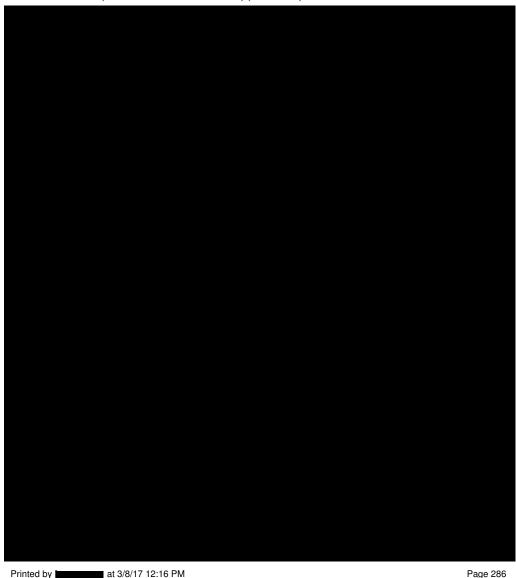
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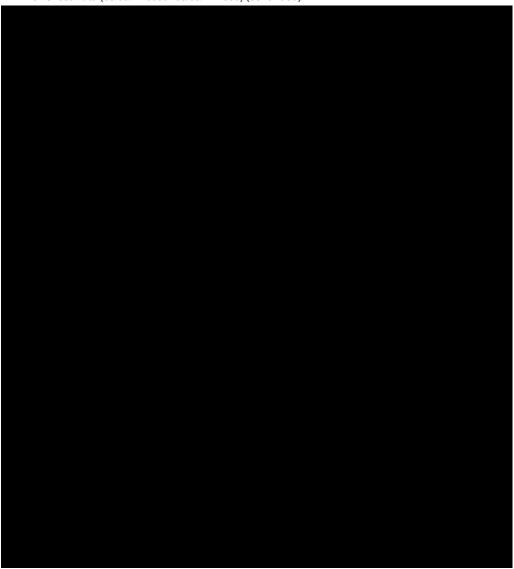
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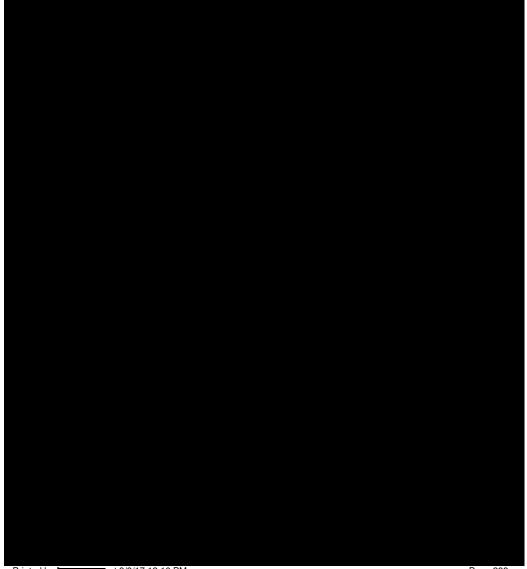
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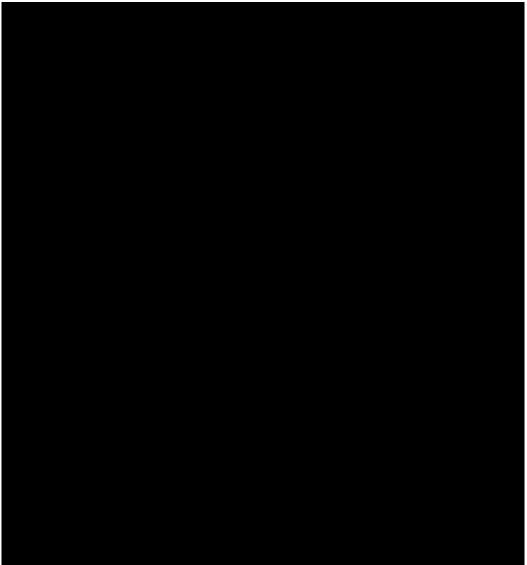
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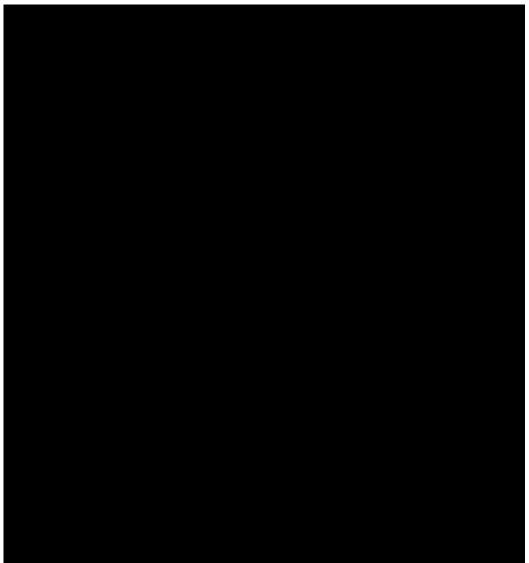
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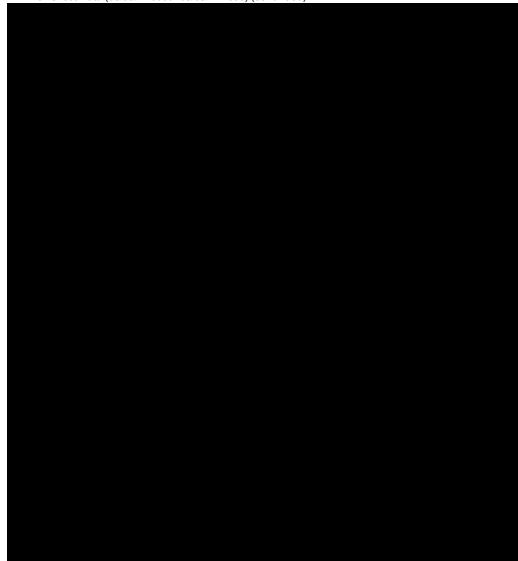
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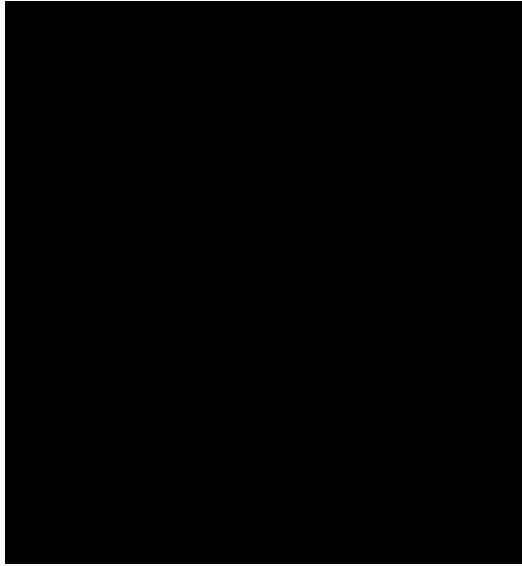
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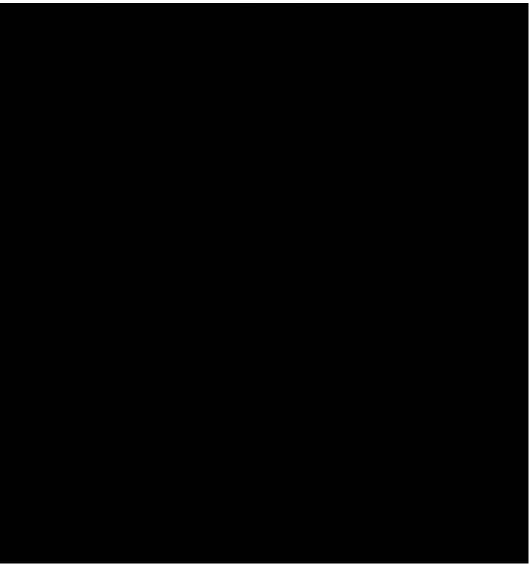
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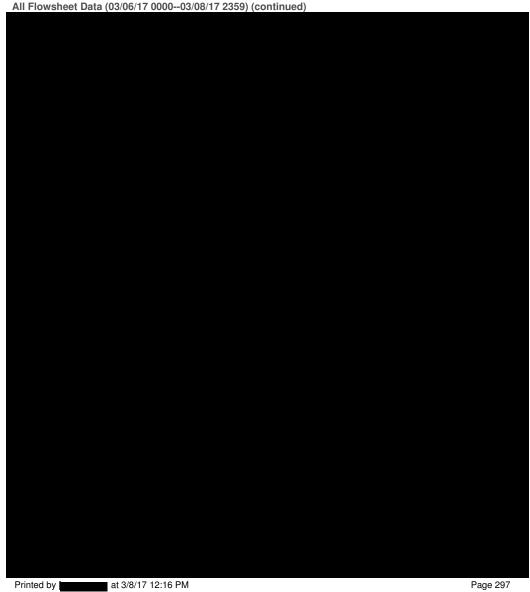
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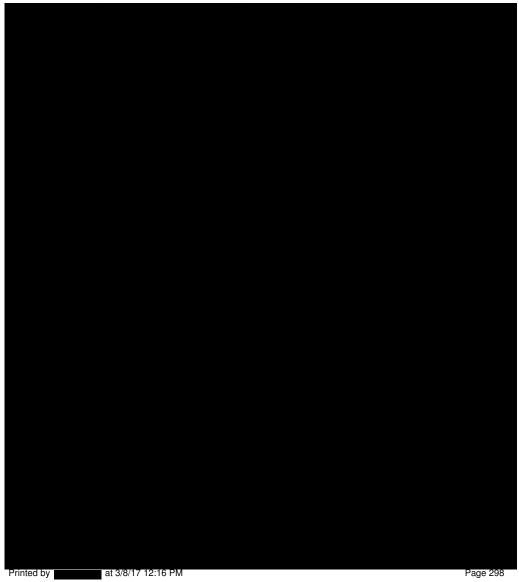
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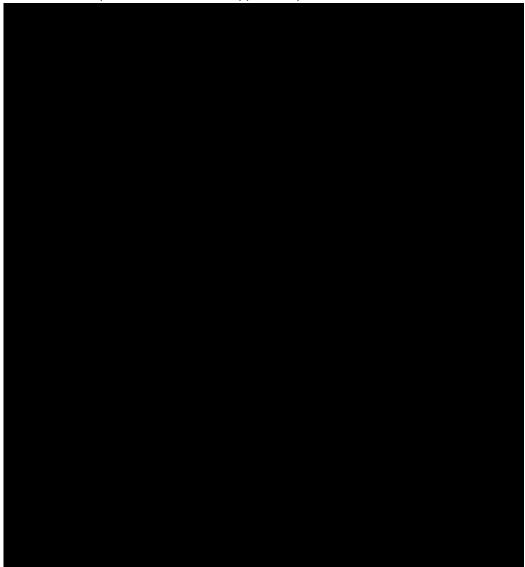
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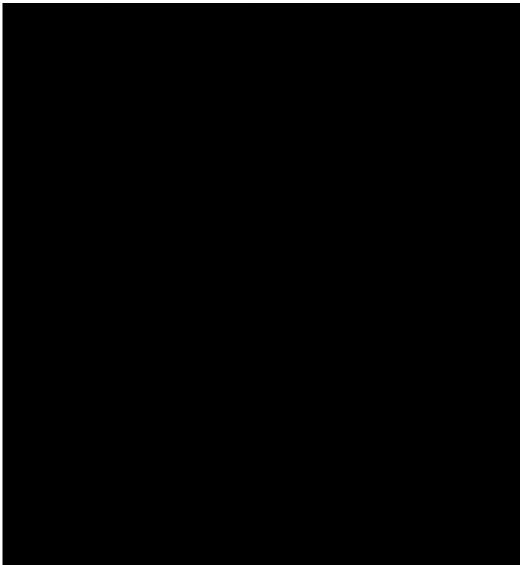
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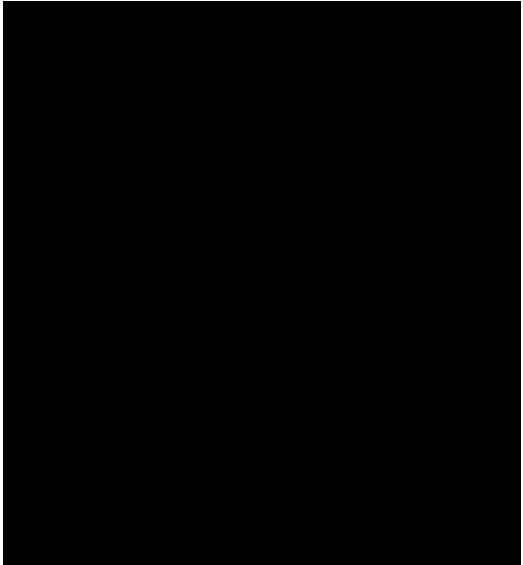
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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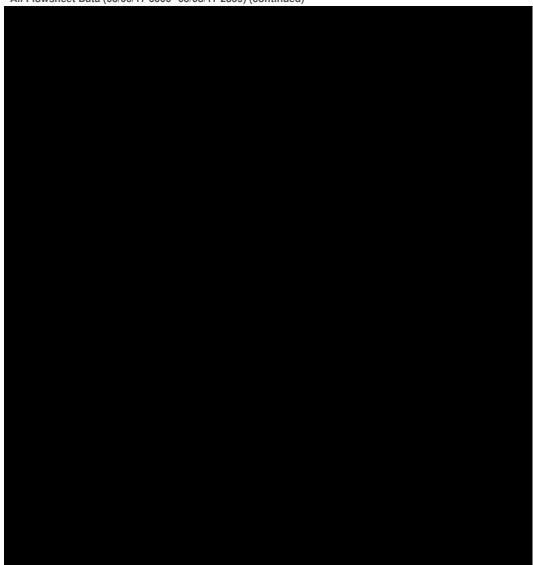
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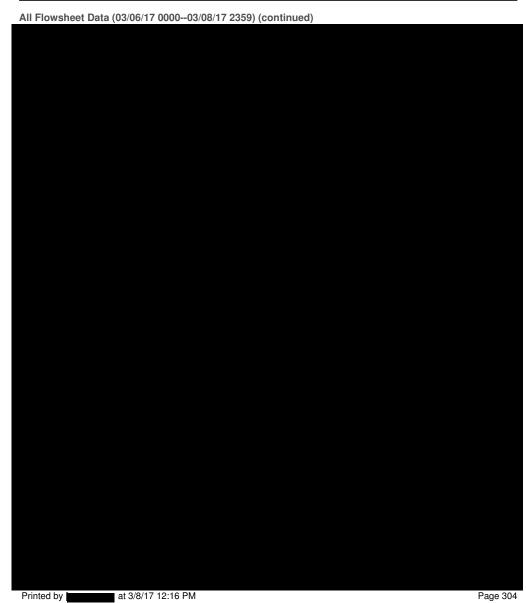
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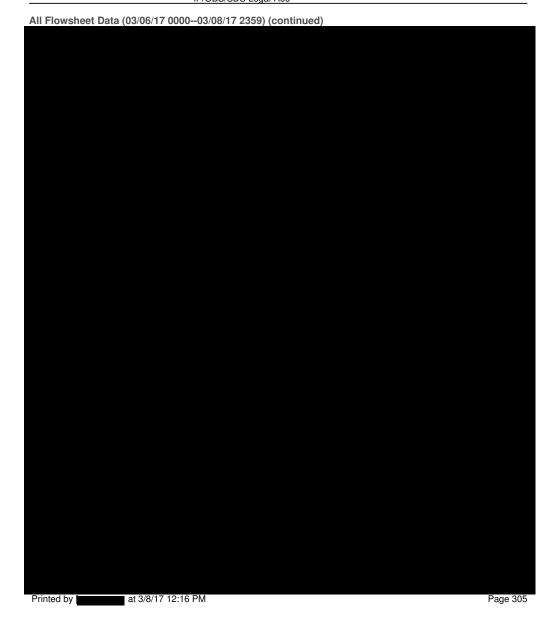
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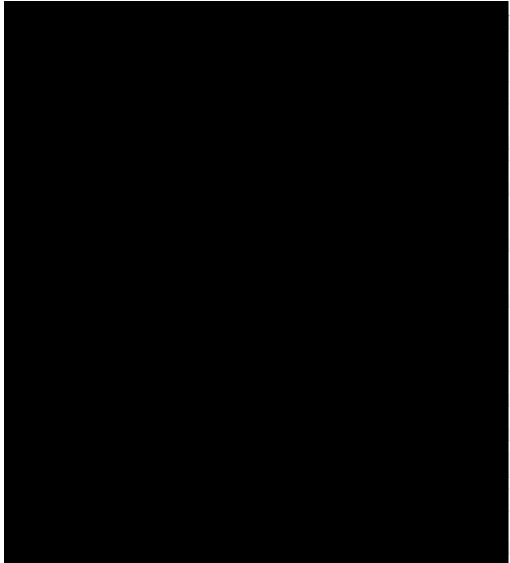
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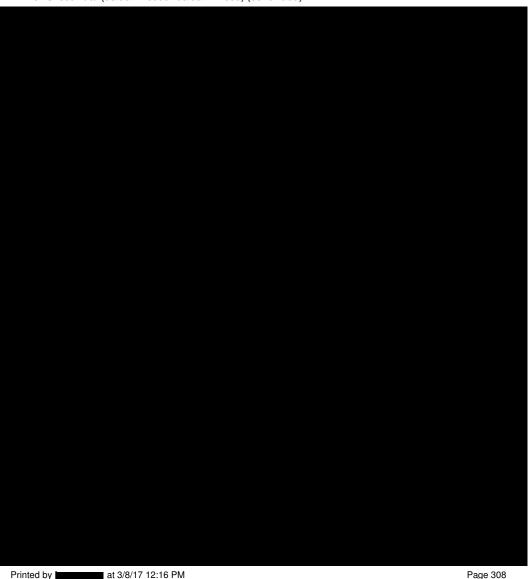
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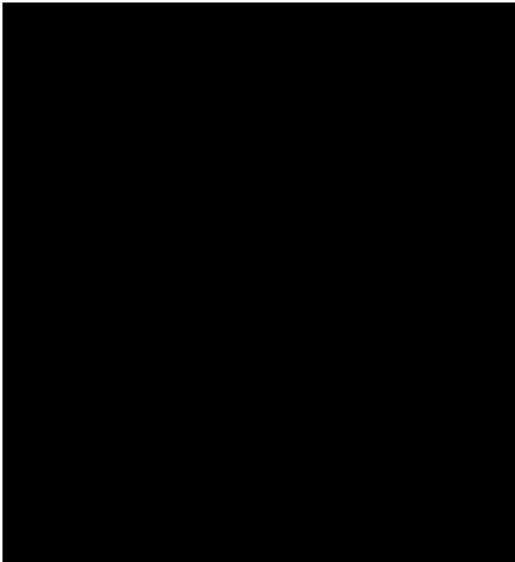
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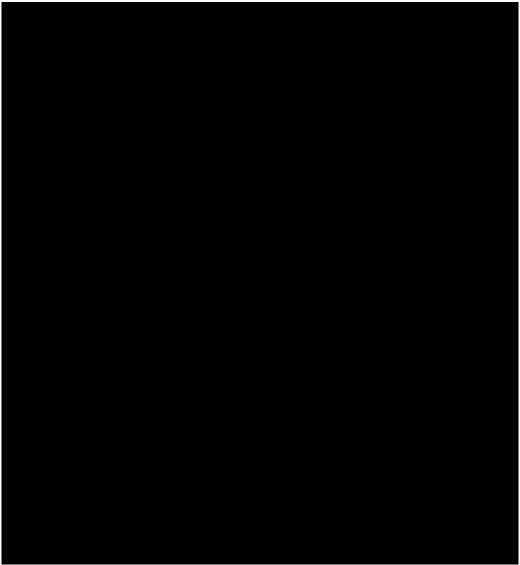
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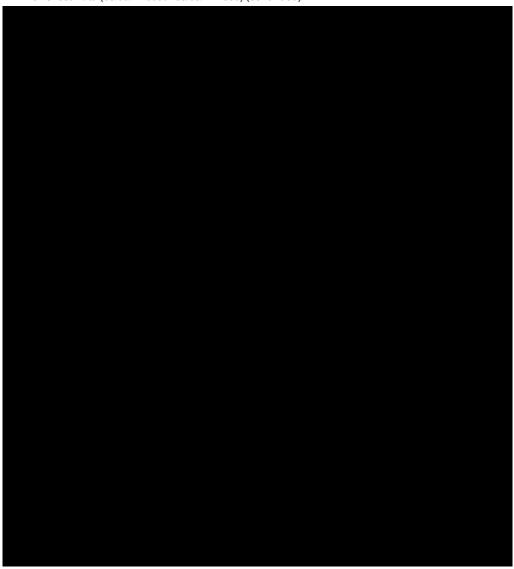
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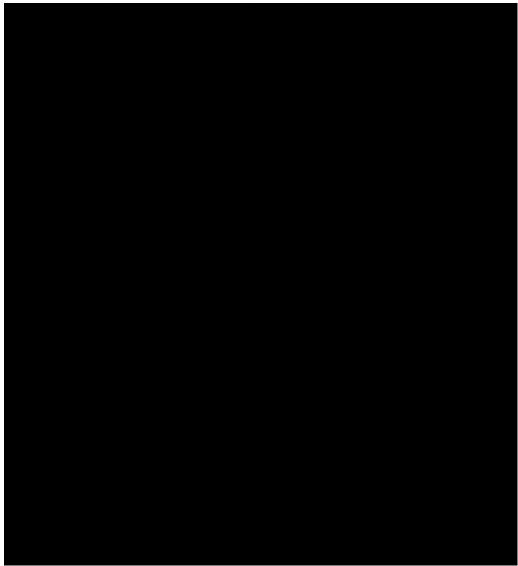
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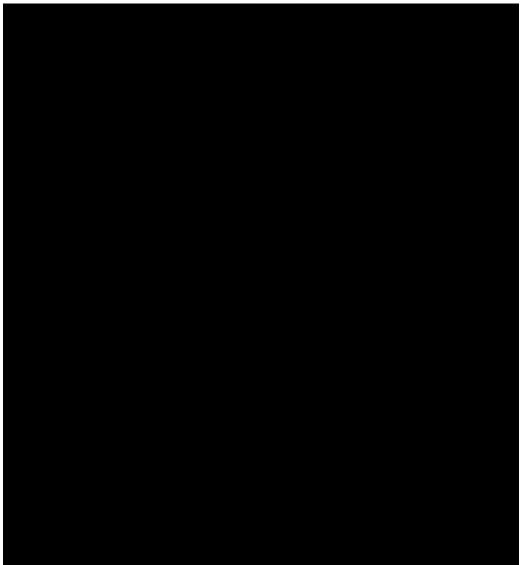
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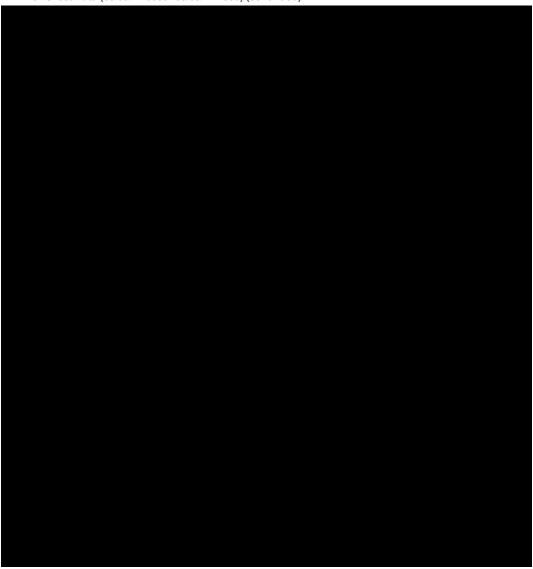
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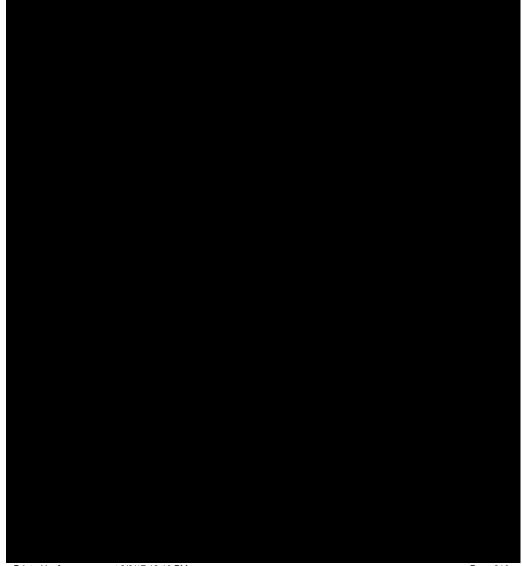
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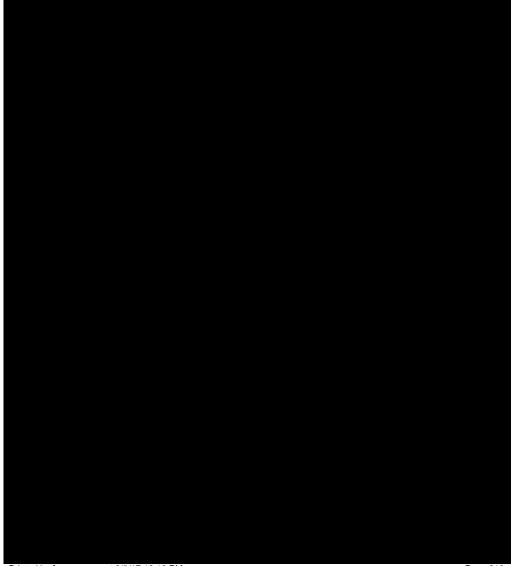
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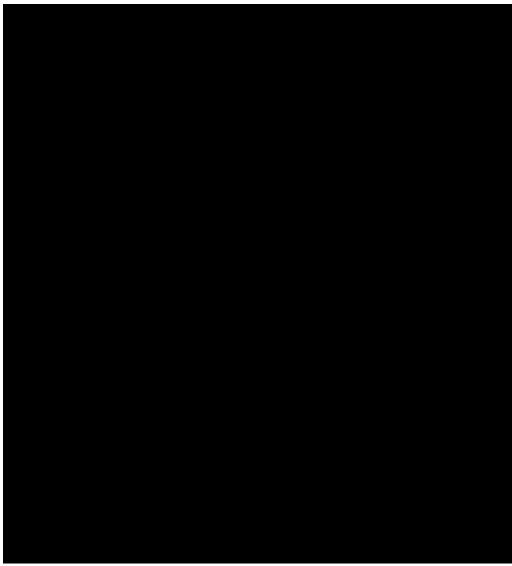
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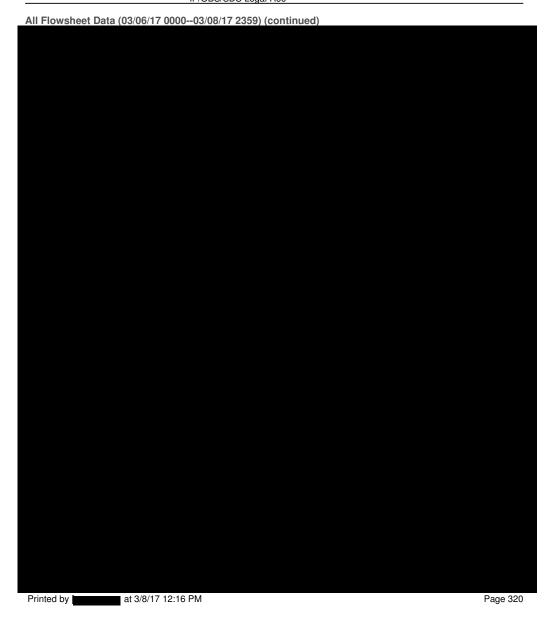
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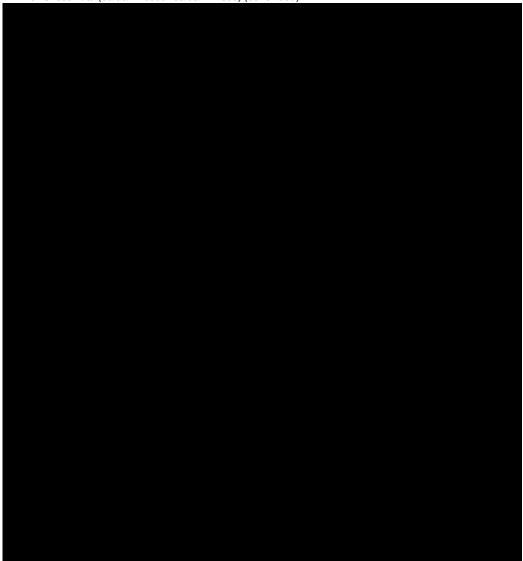
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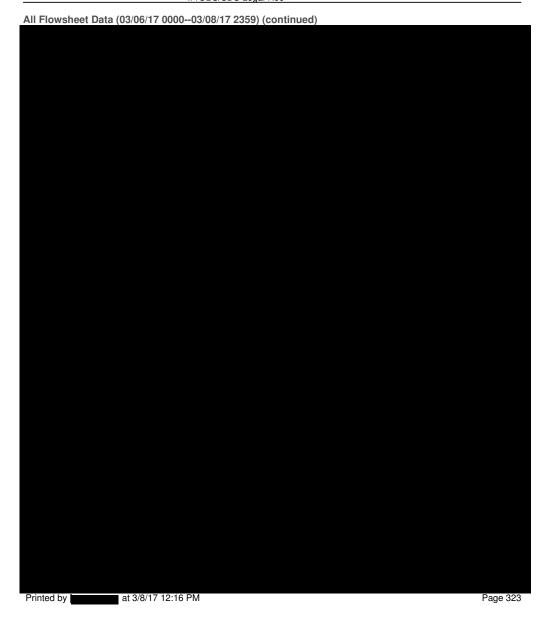
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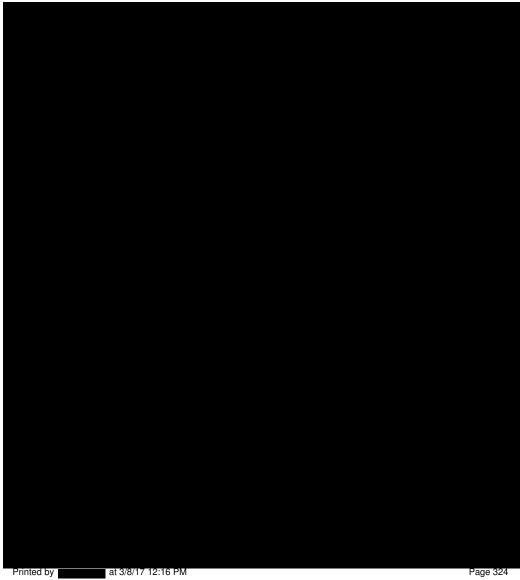
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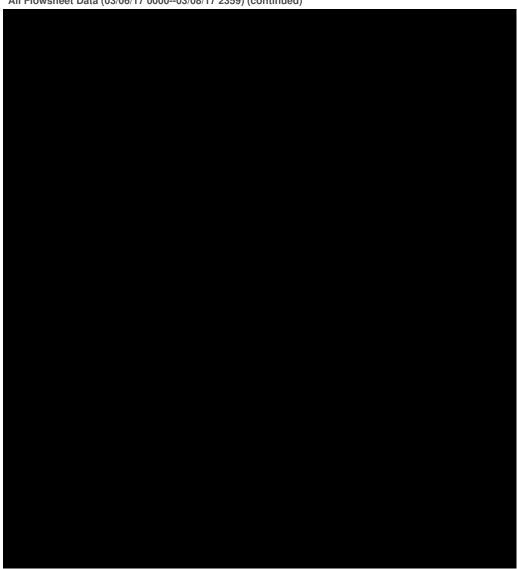
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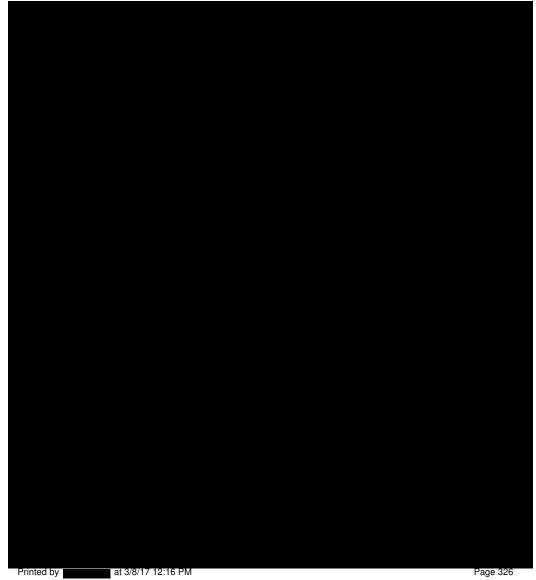
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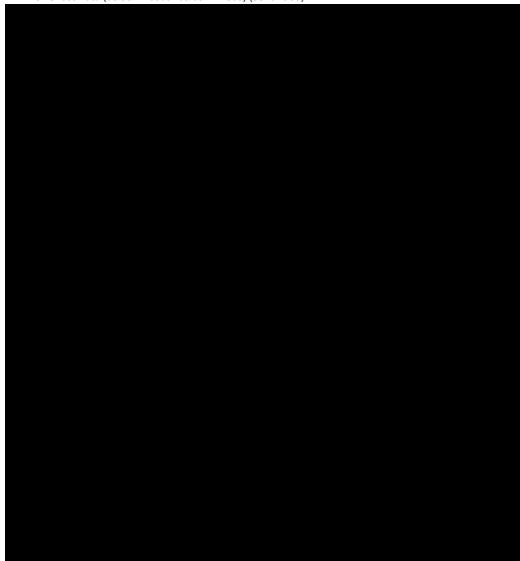
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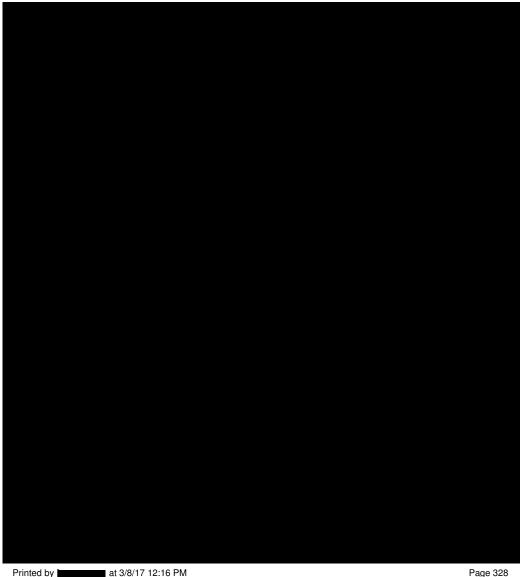
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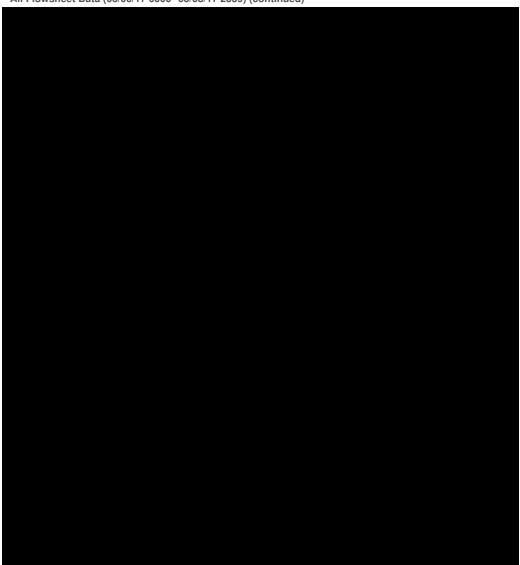
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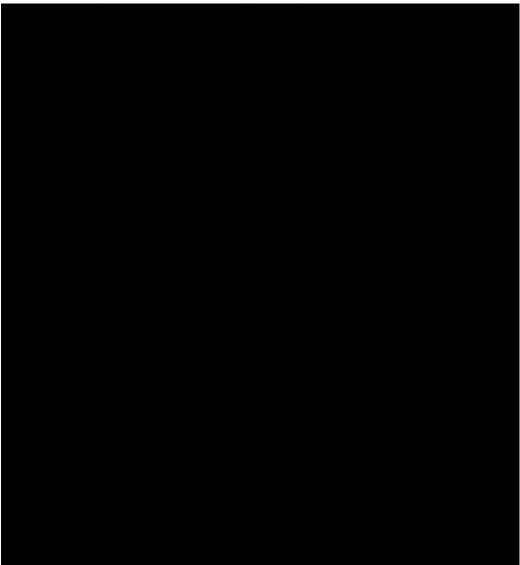
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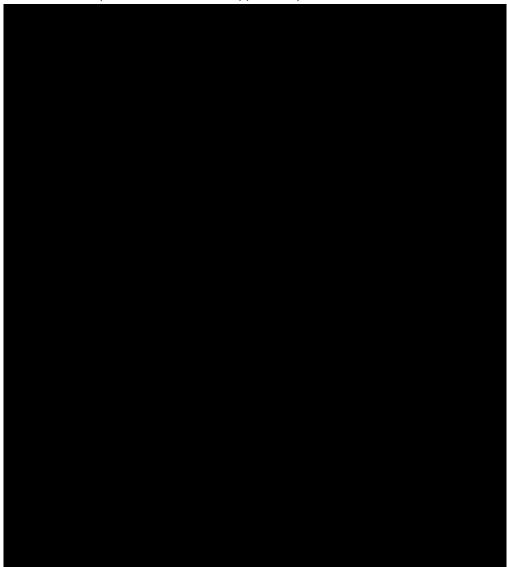
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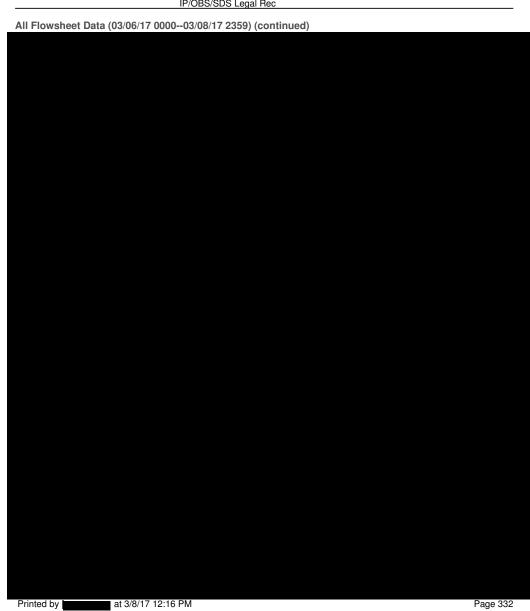
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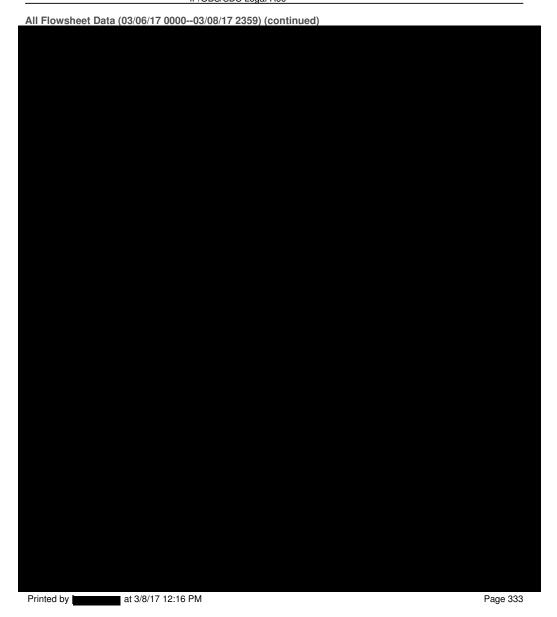
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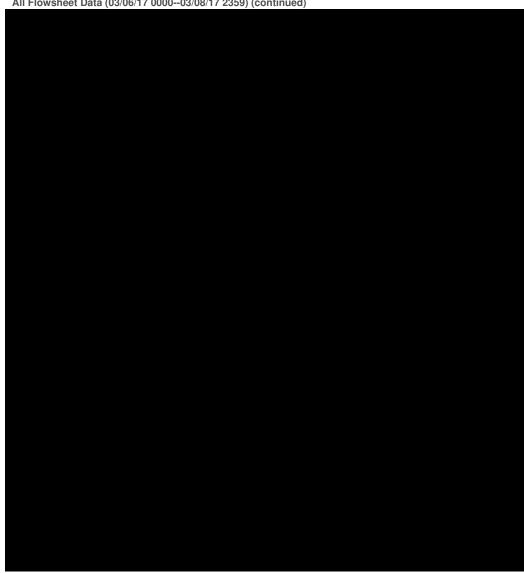
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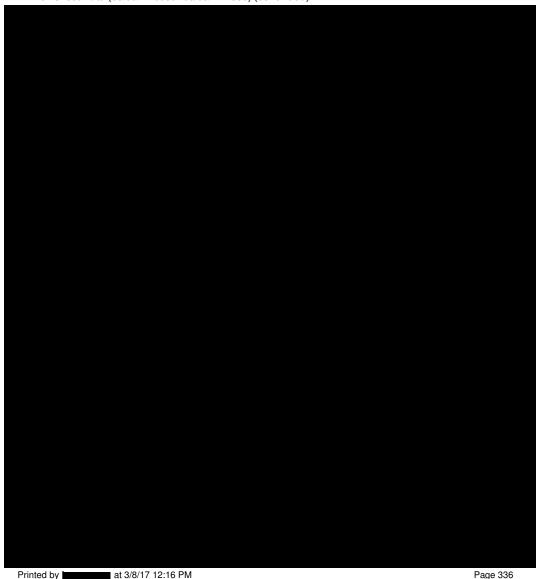
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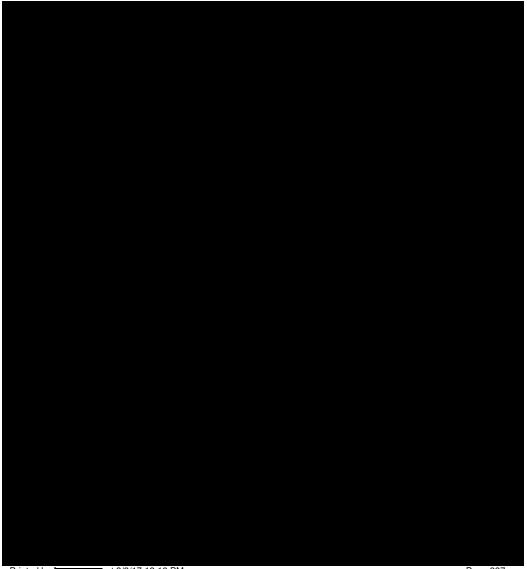
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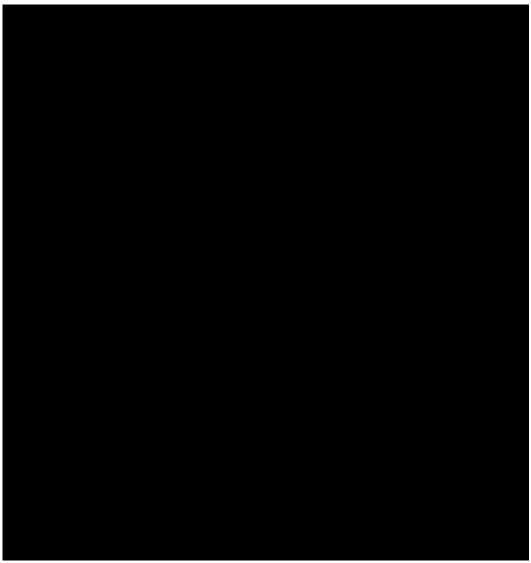
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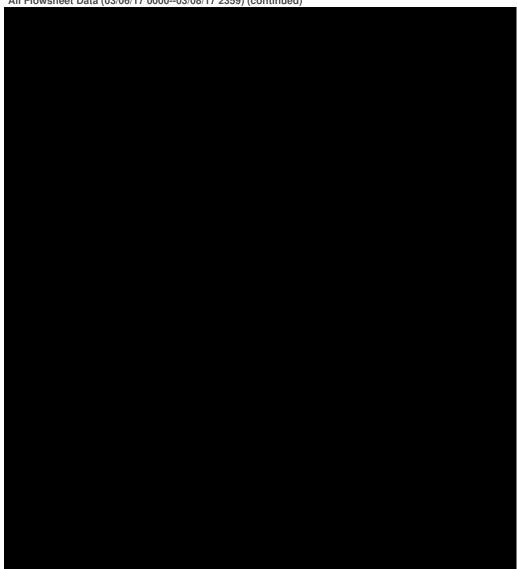
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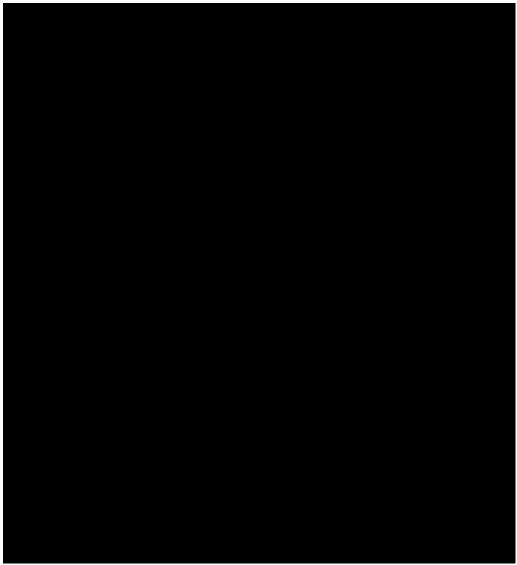
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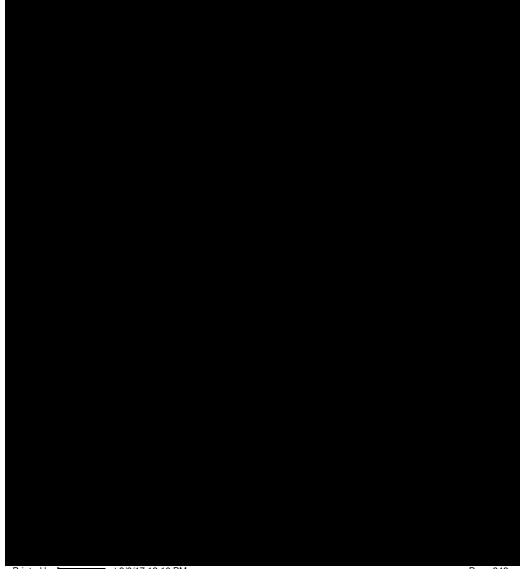
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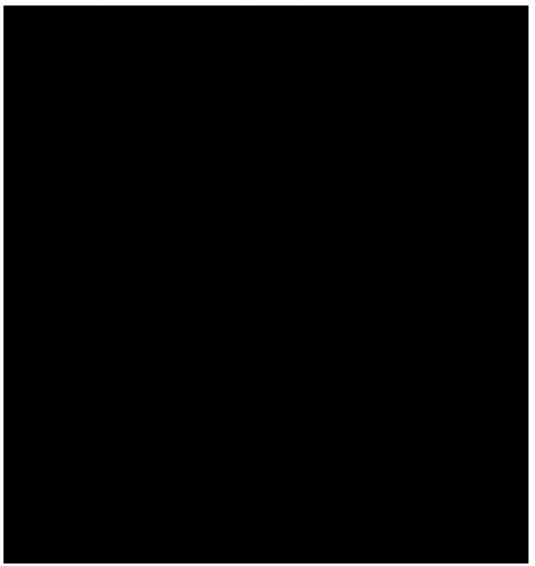
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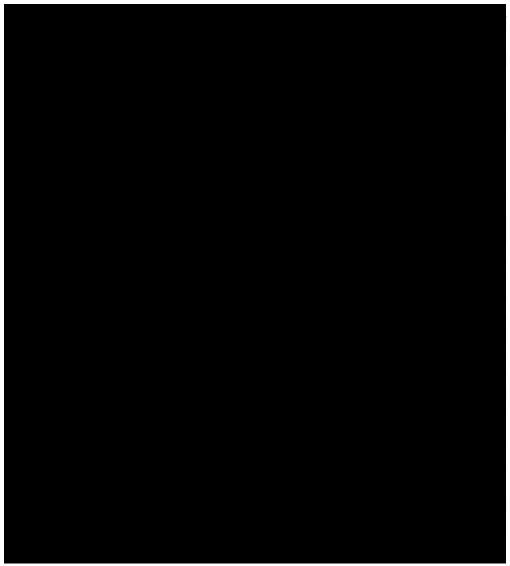
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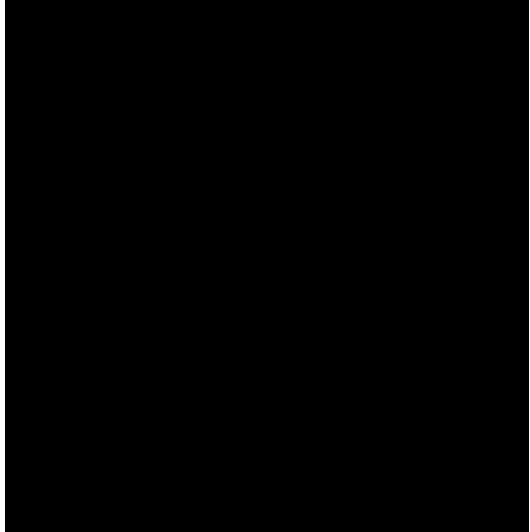
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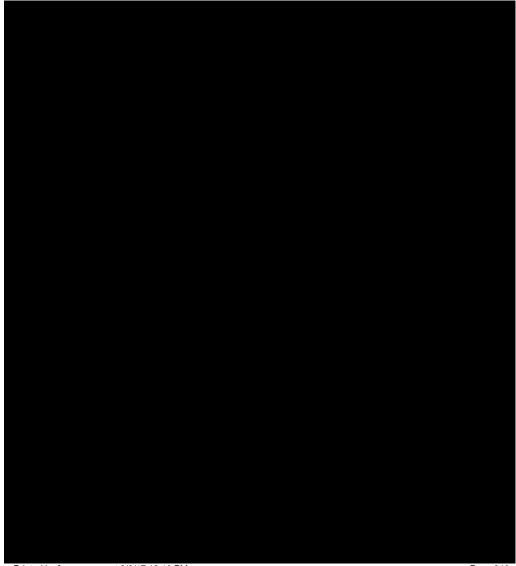
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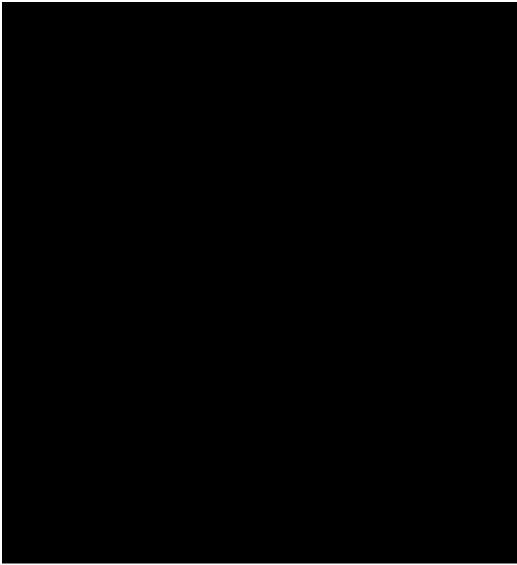
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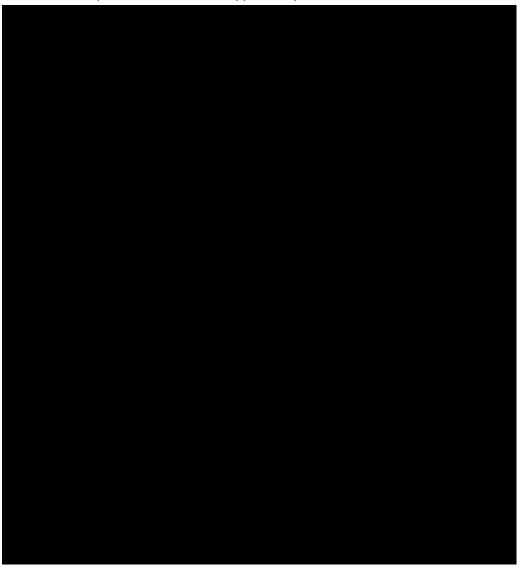
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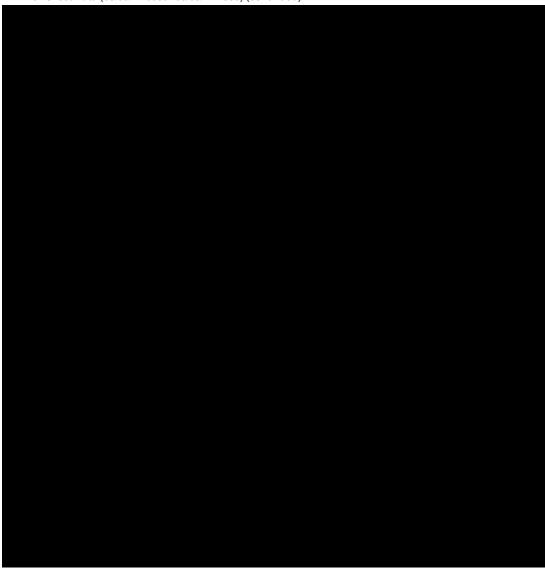
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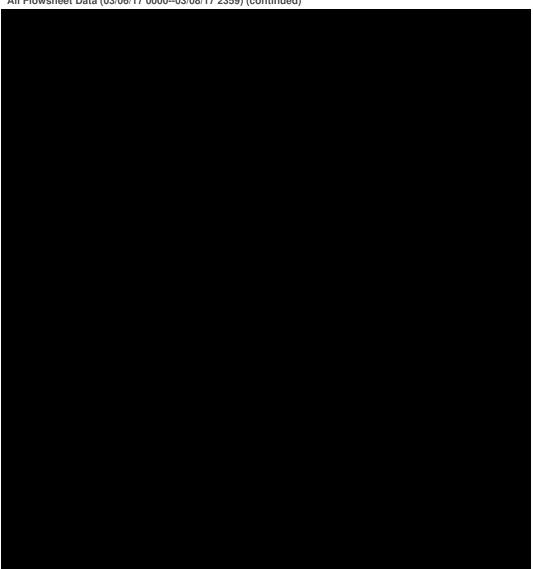
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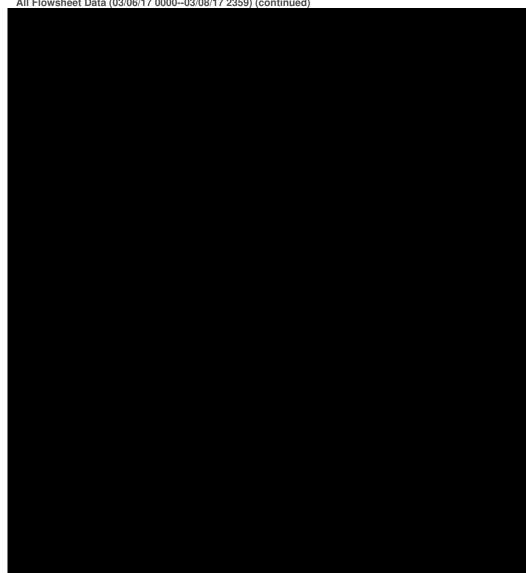
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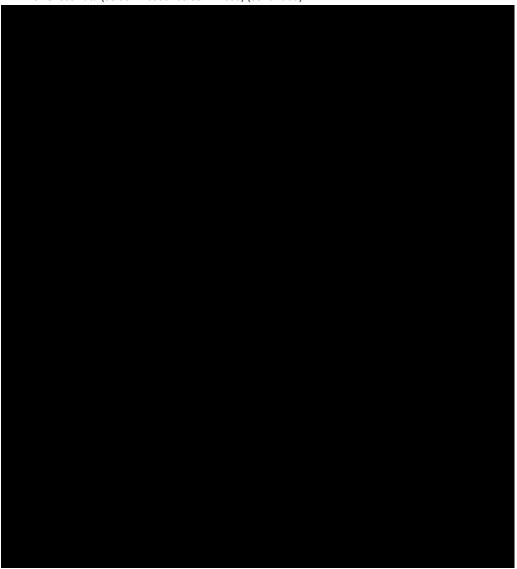
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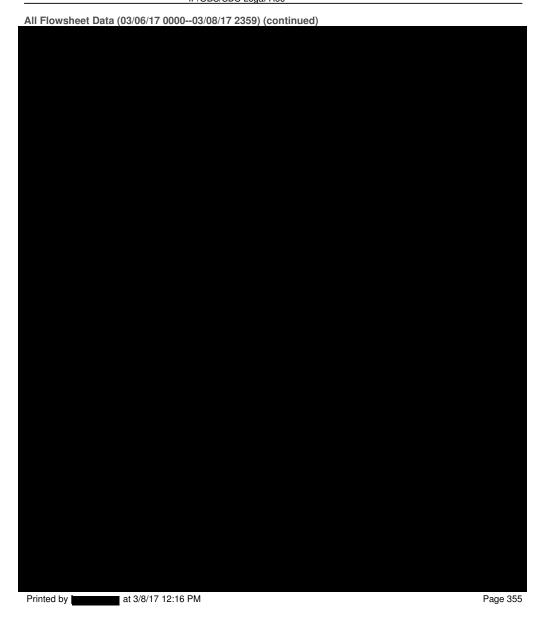
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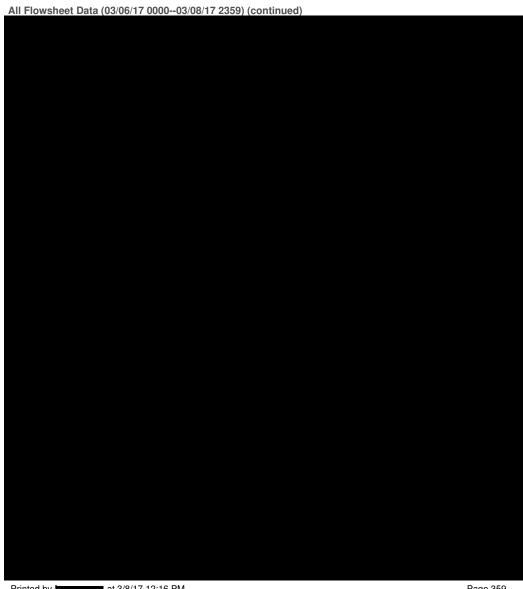
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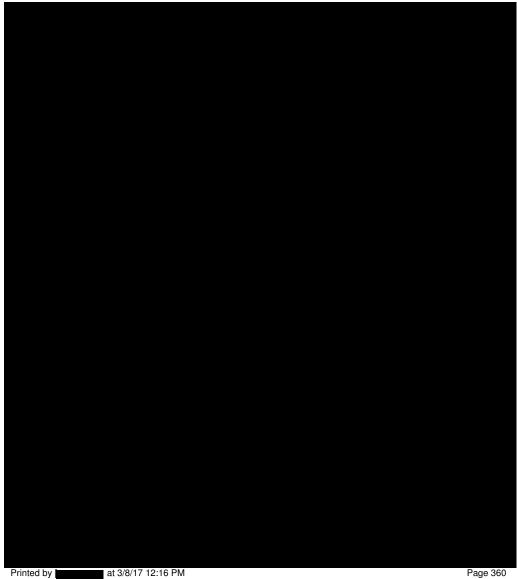
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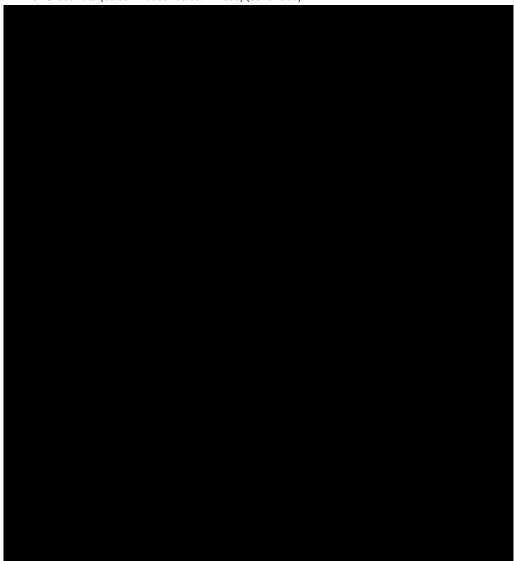
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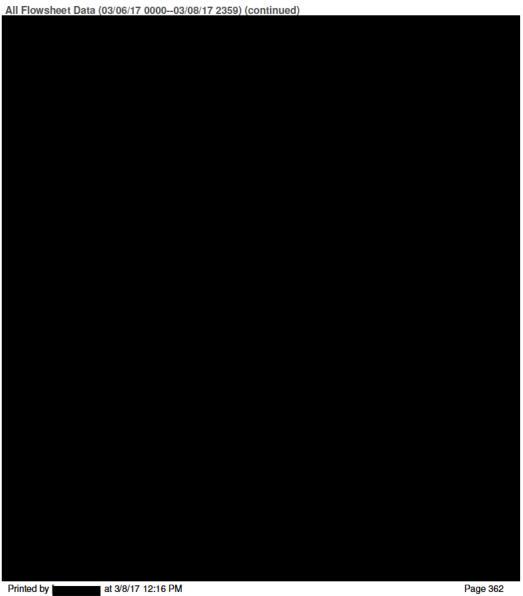
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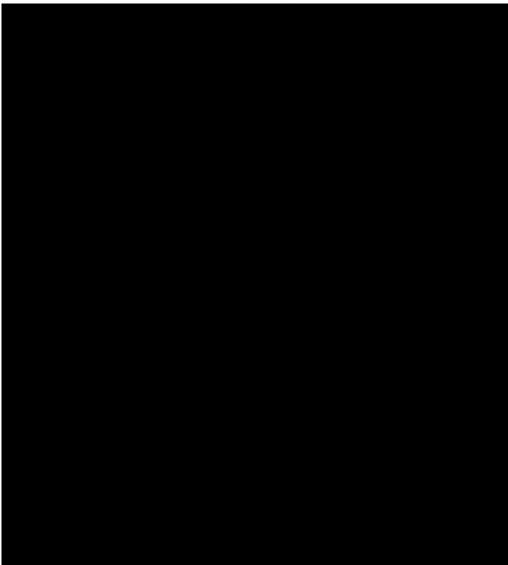
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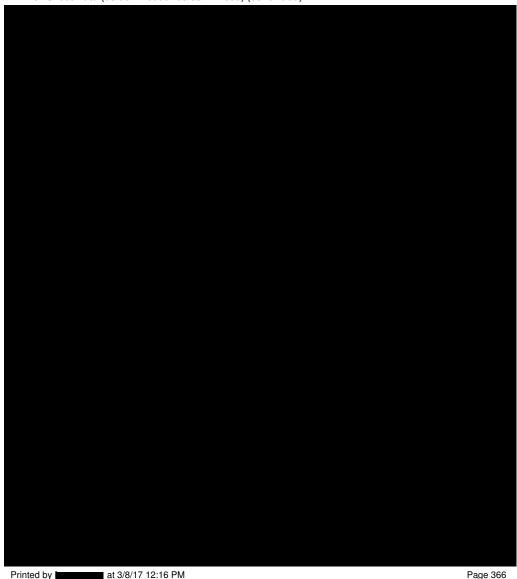
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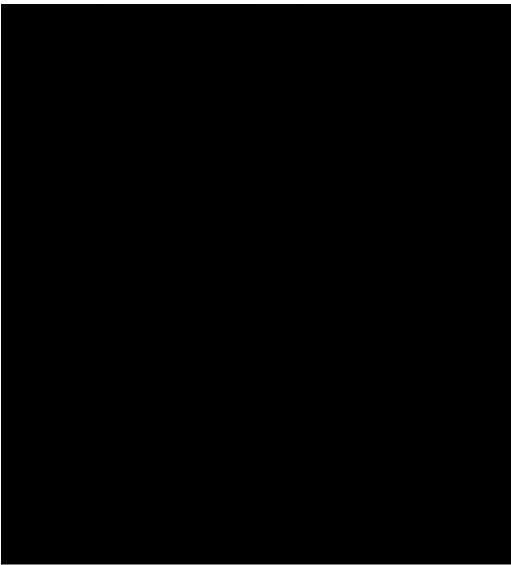
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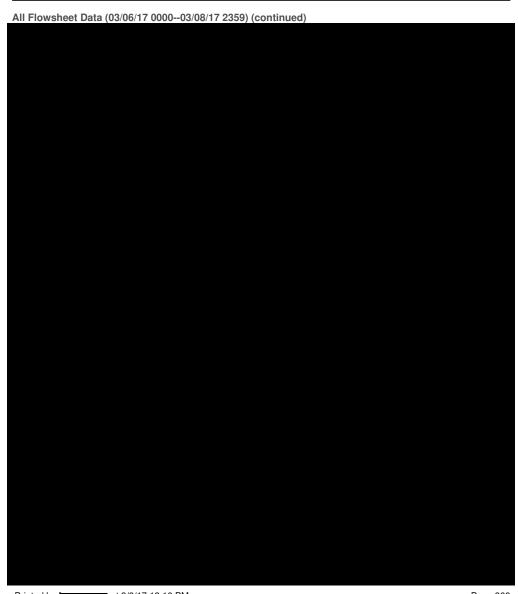
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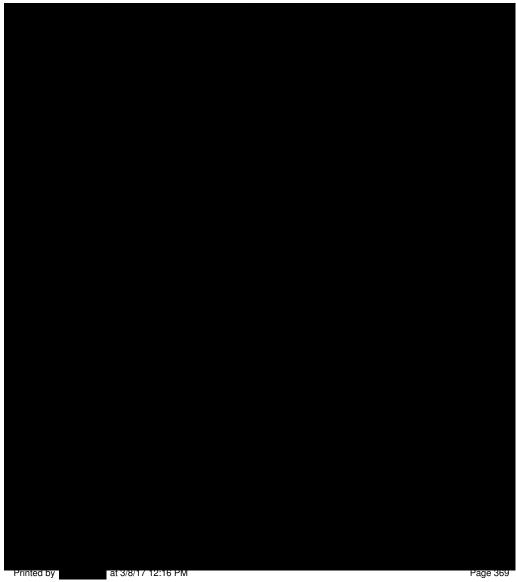
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SACRAMENTO POLICE DEPARTMENT

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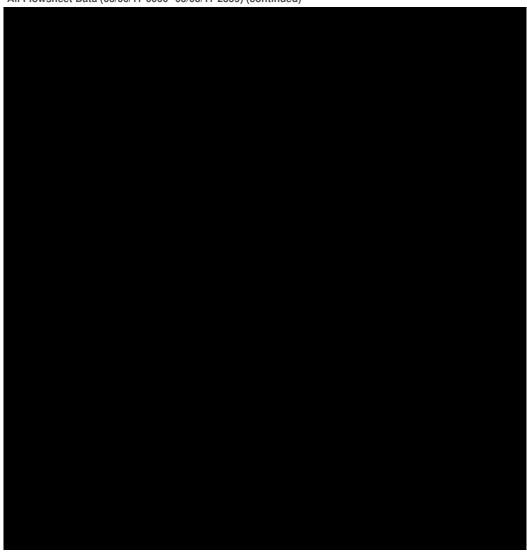
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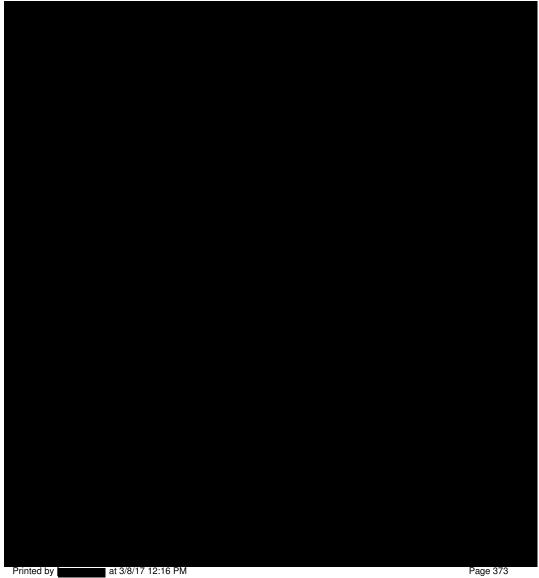


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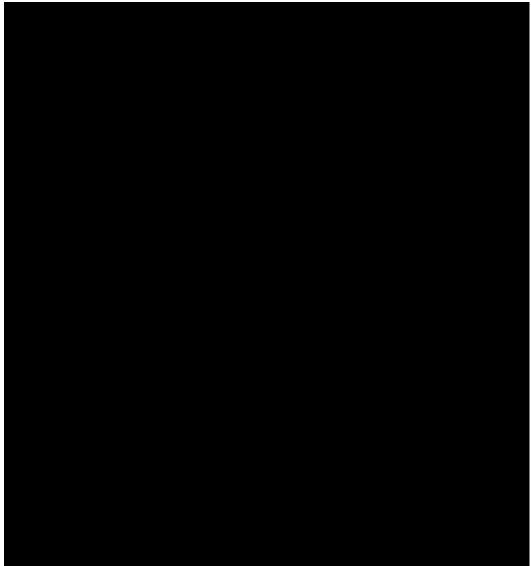
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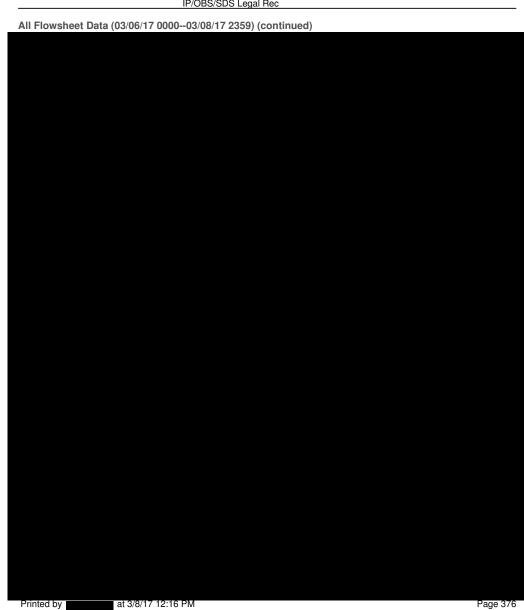
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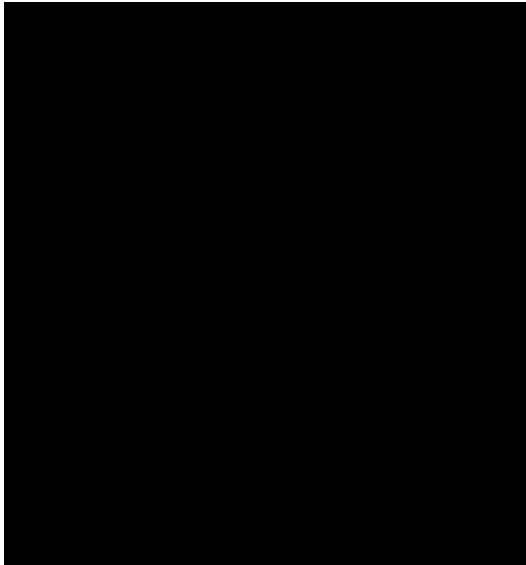
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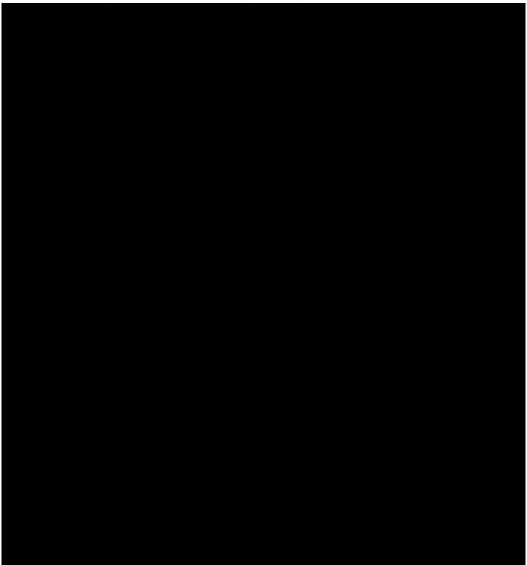
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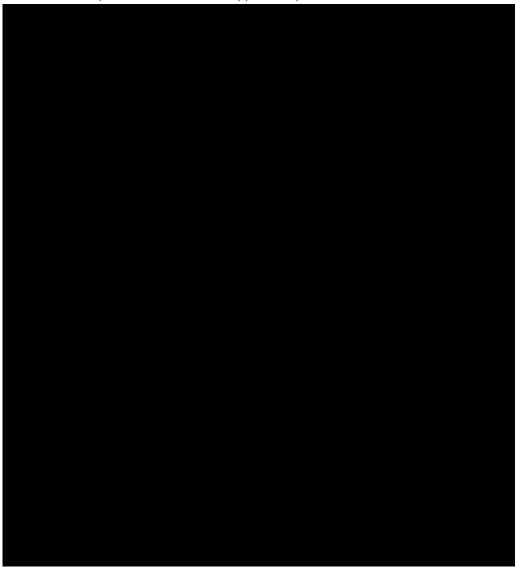
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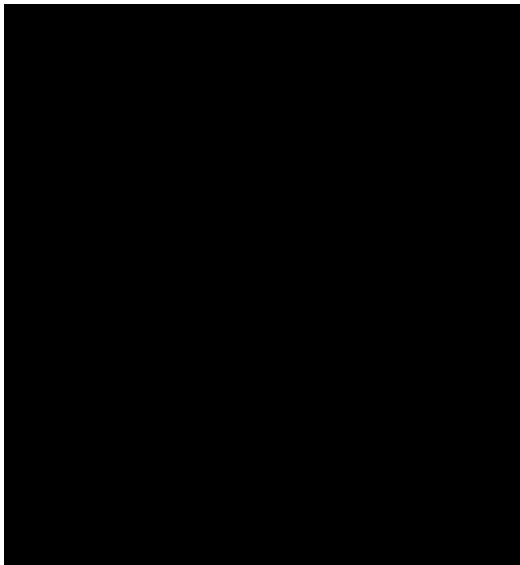
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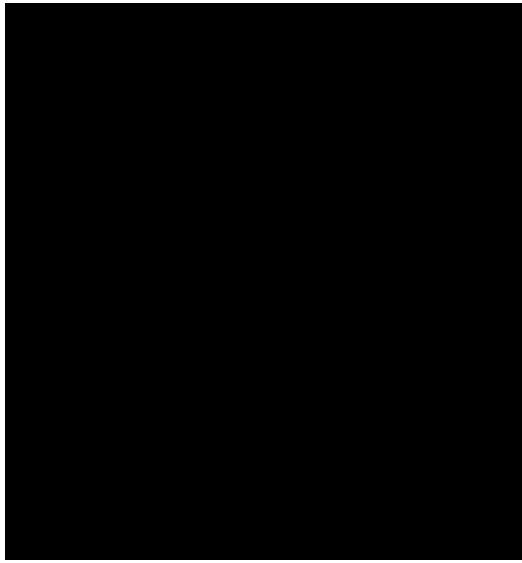
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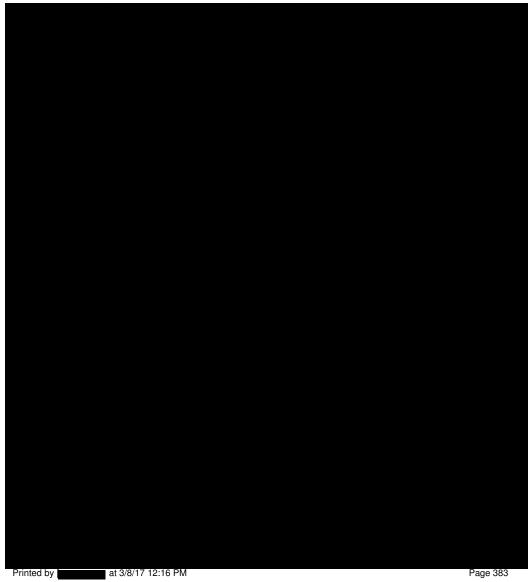
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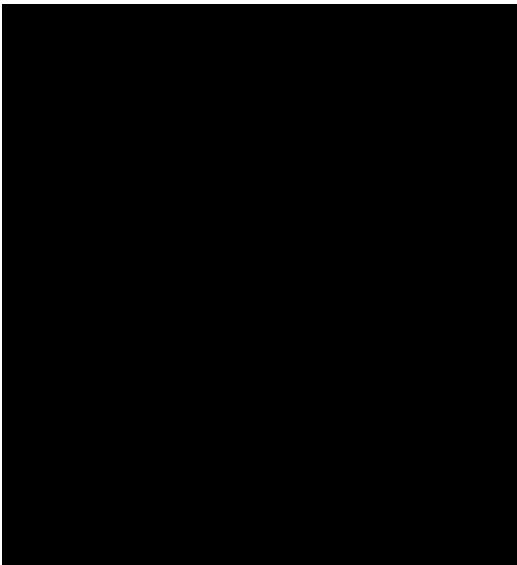
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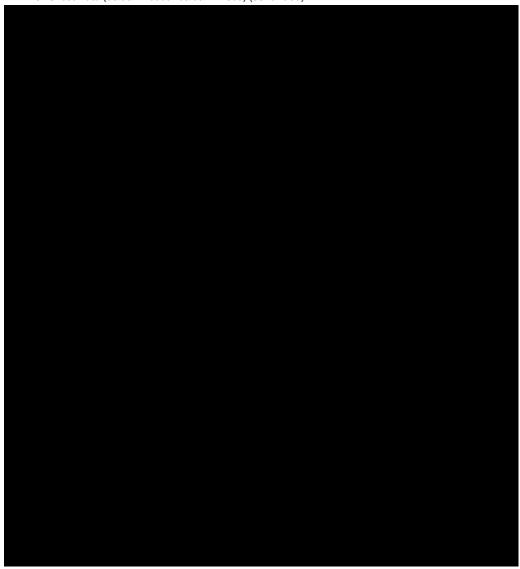
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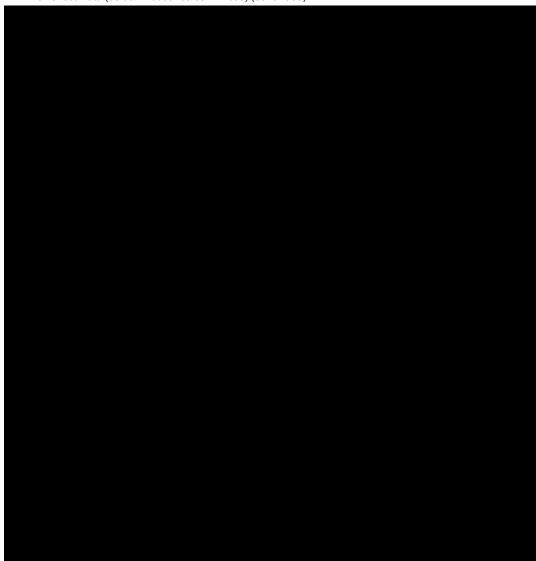
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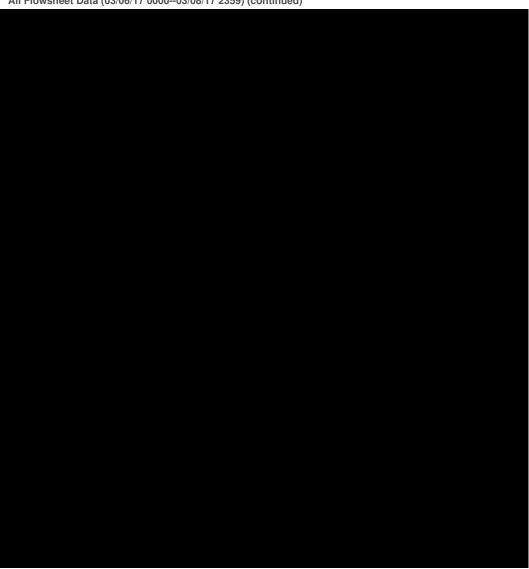
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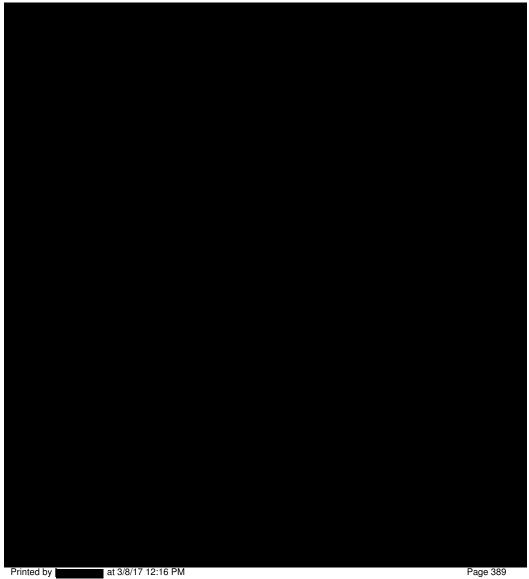
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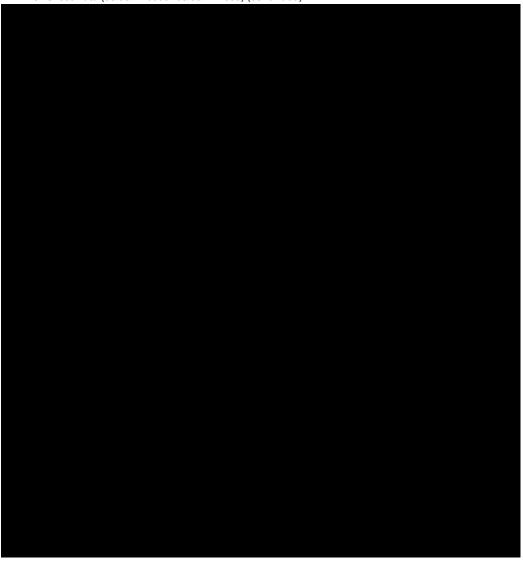
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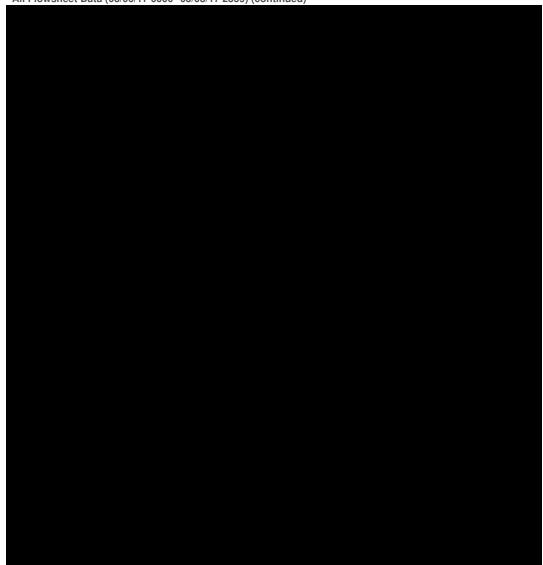
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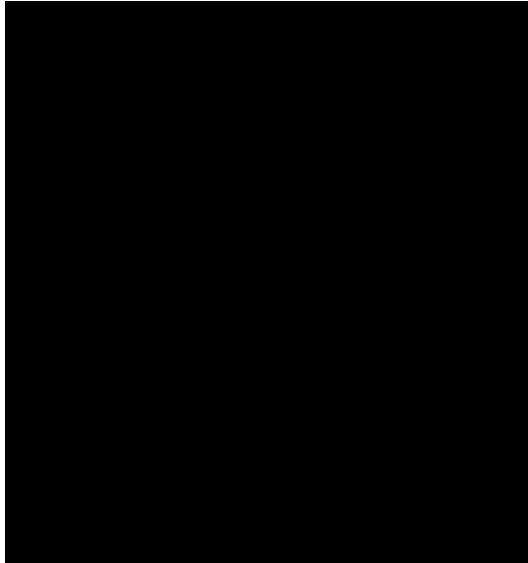
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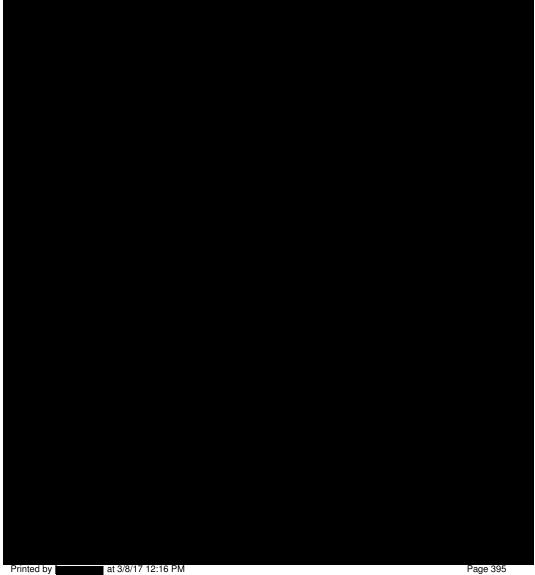
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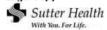
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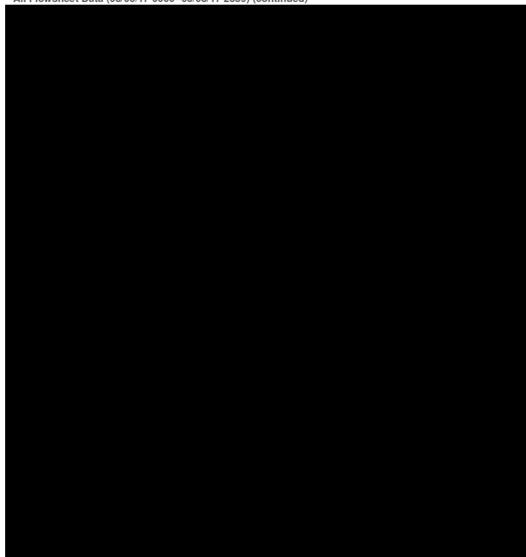
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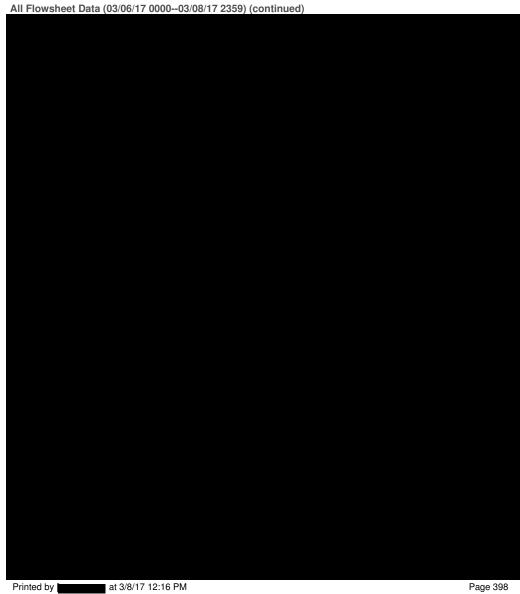
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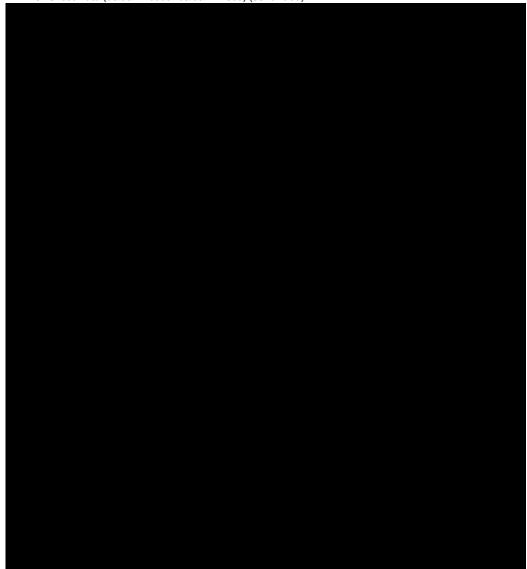
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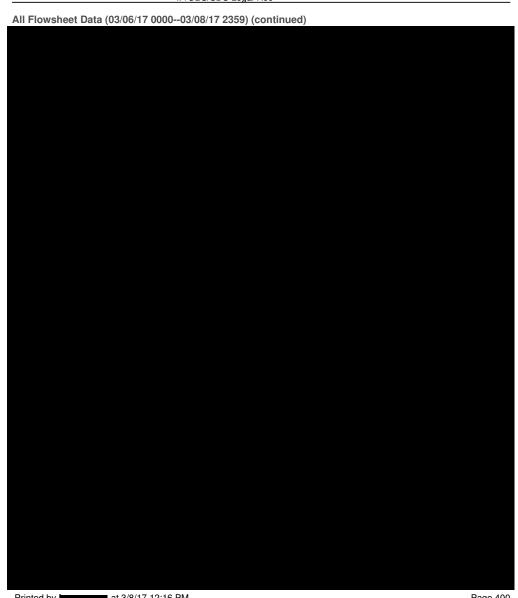
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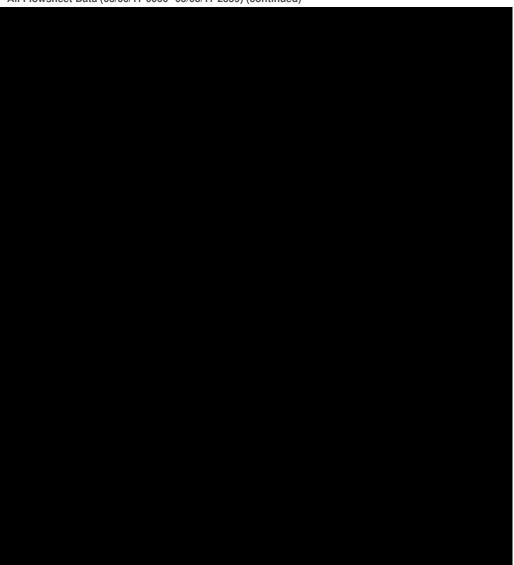
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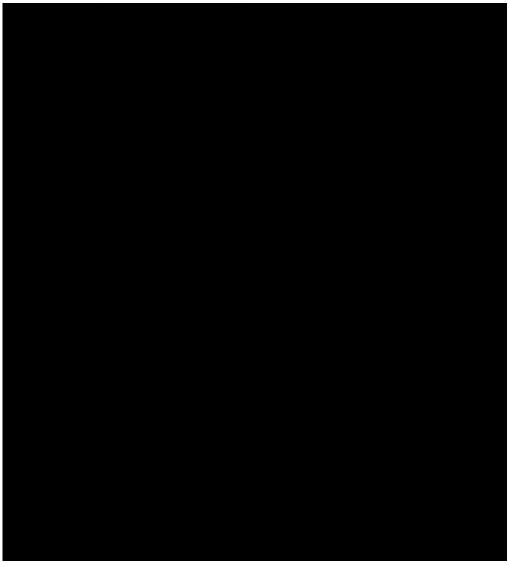
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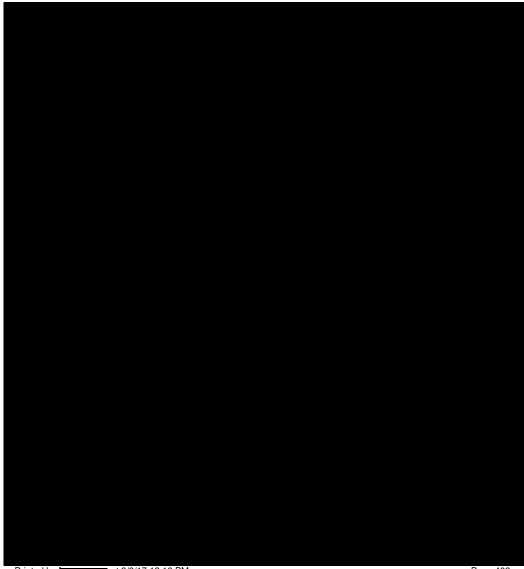
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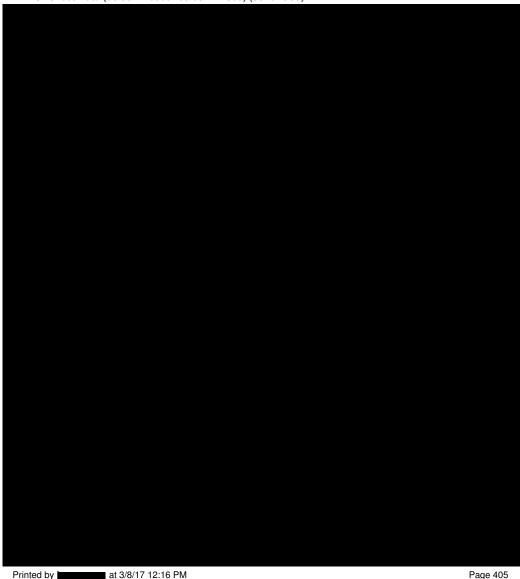
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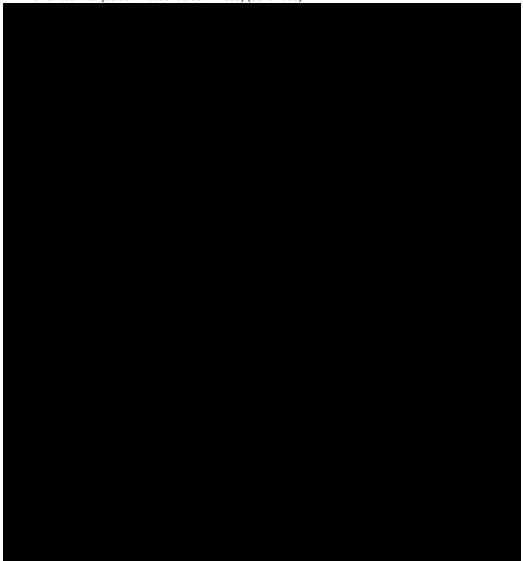
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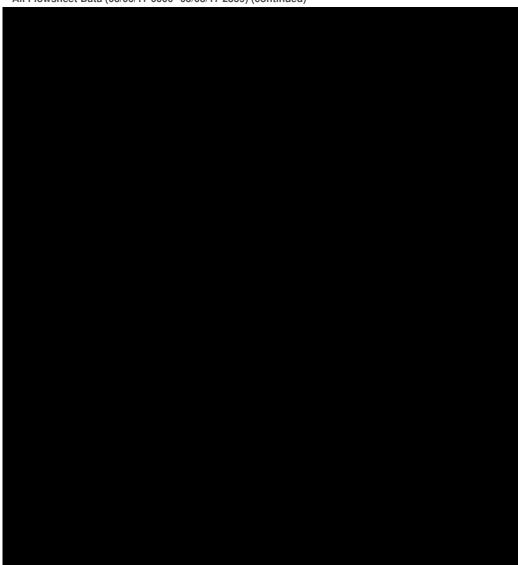
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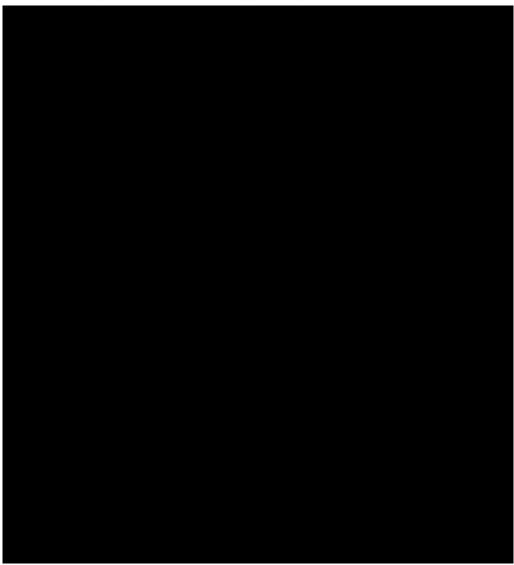
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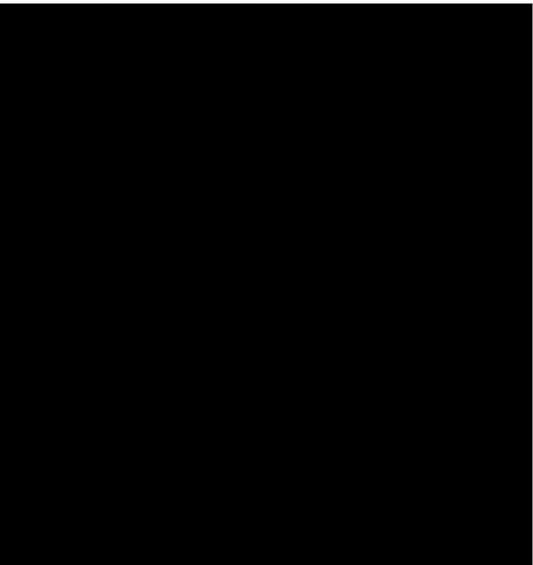
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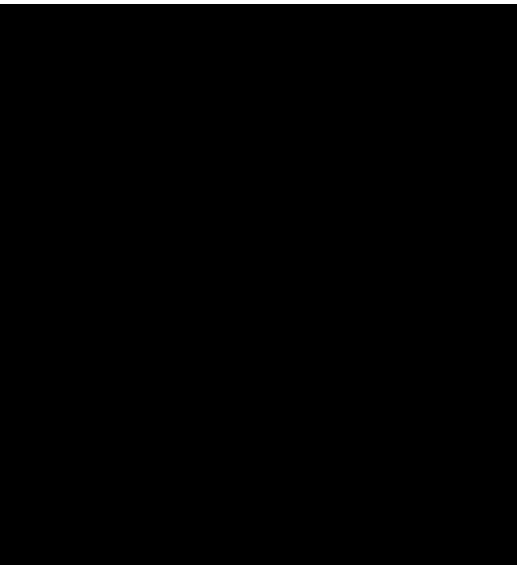
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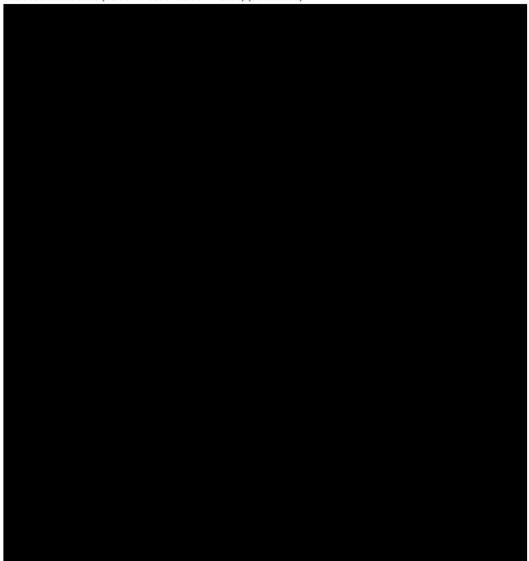
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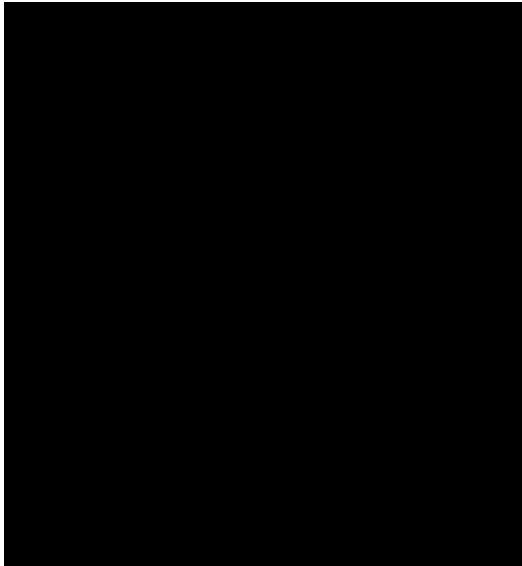
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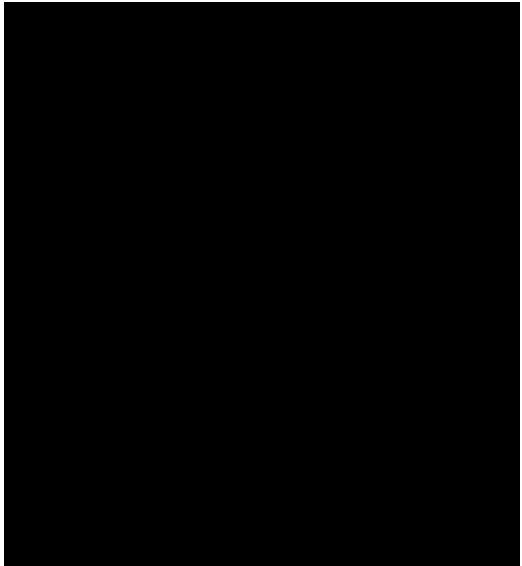
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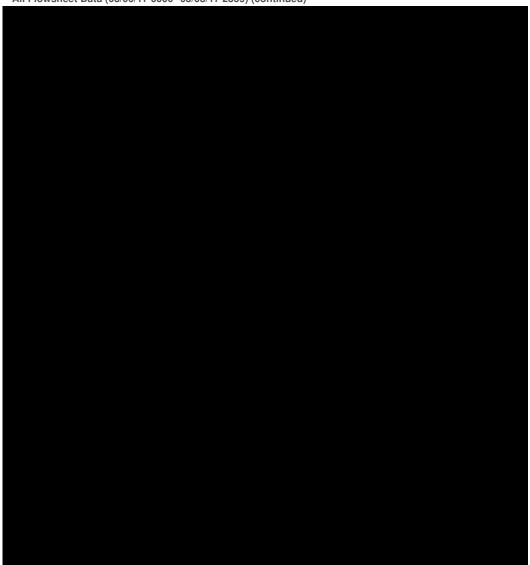
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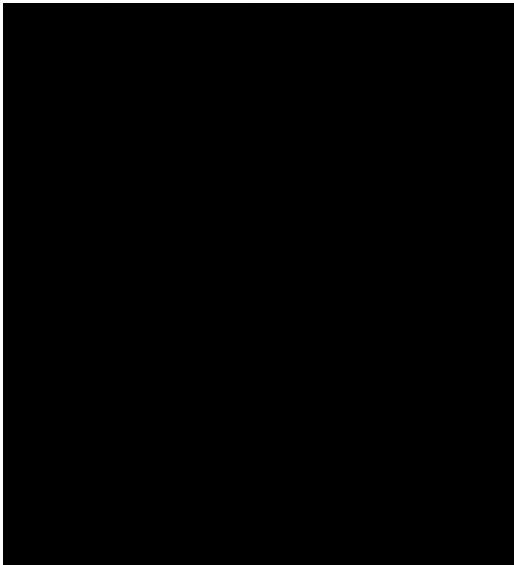
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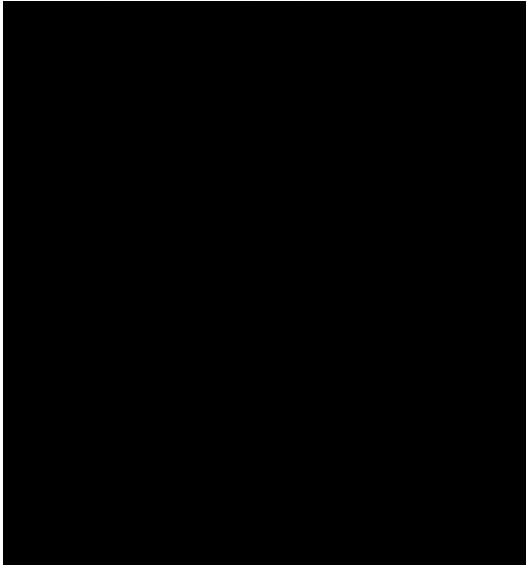
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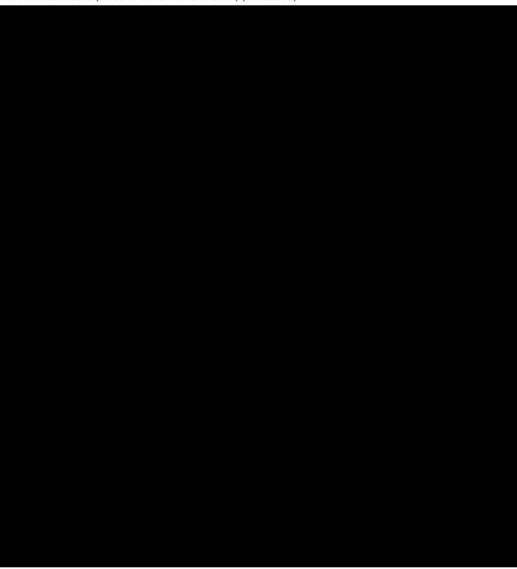
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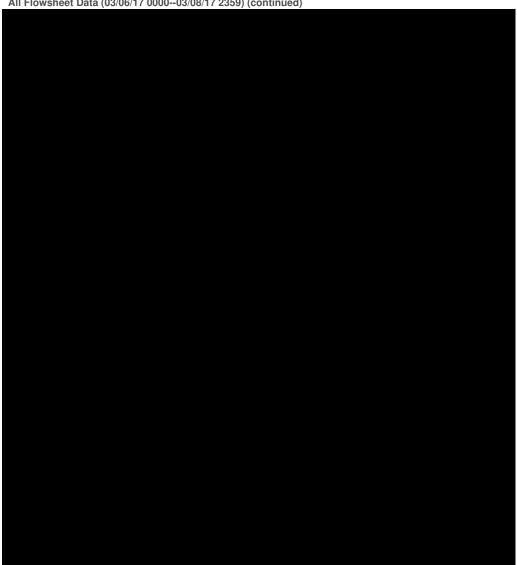
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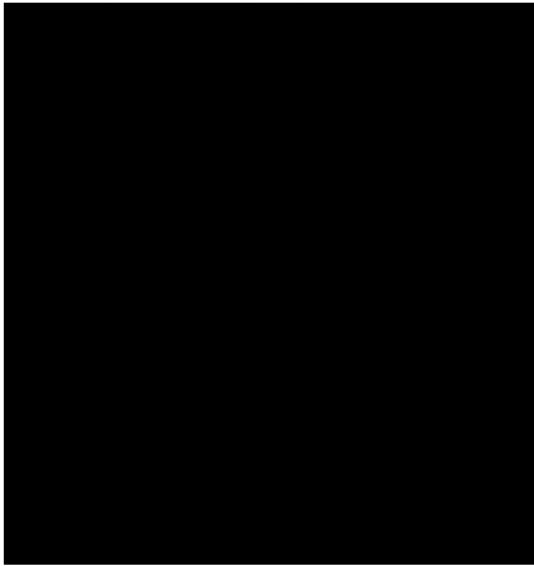
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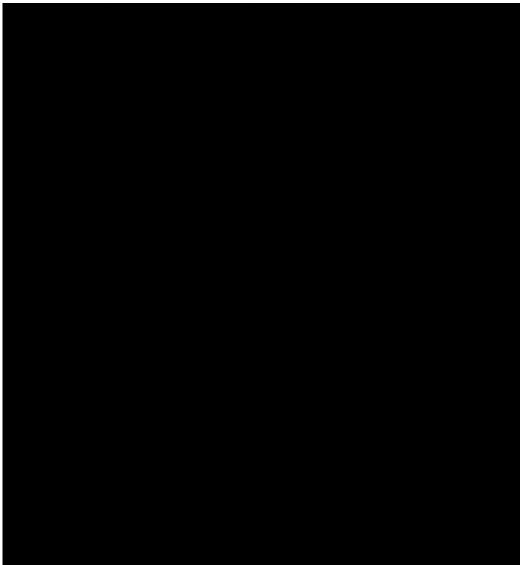
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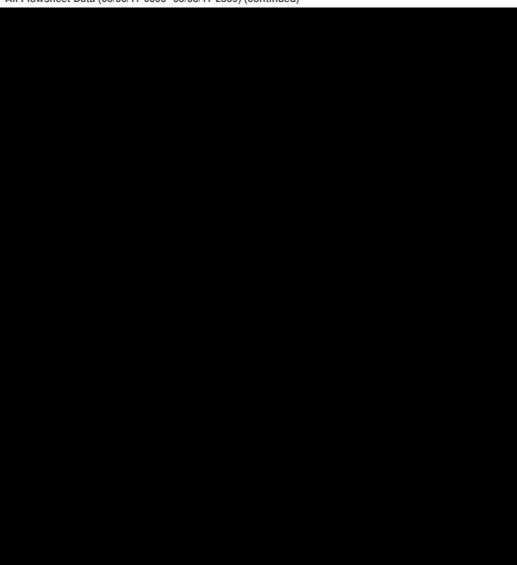
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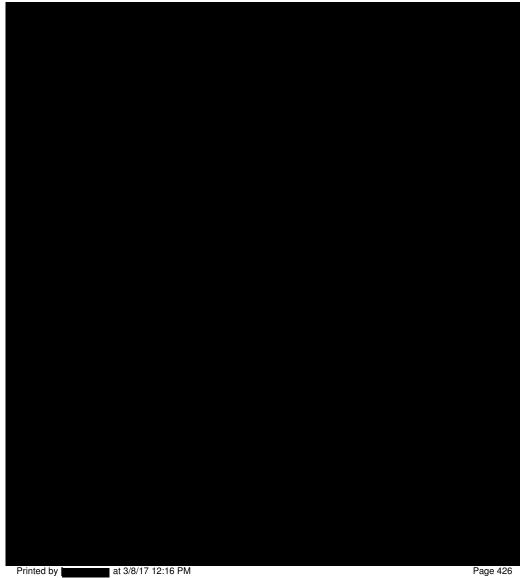
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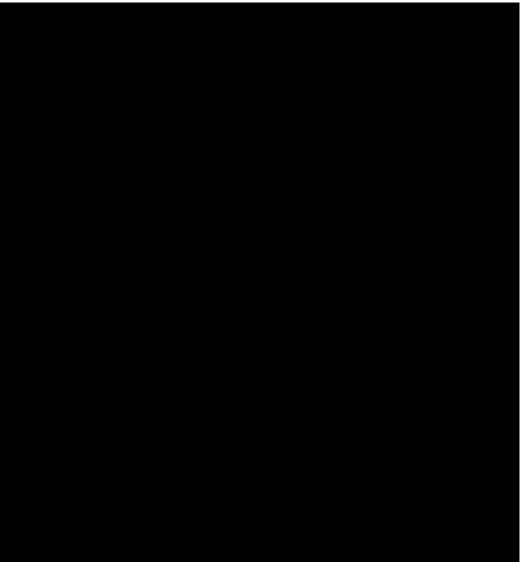
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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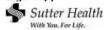
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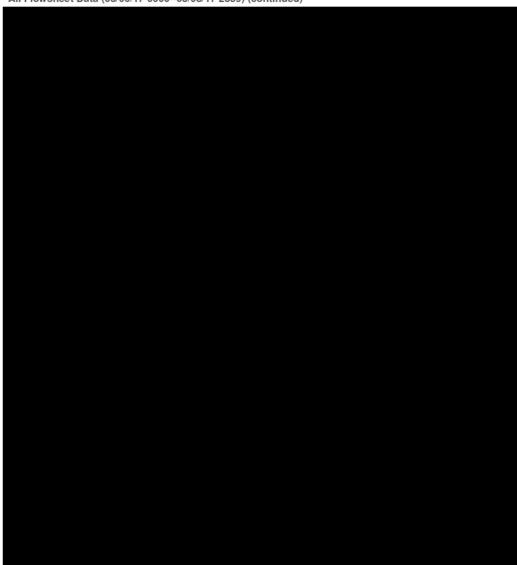
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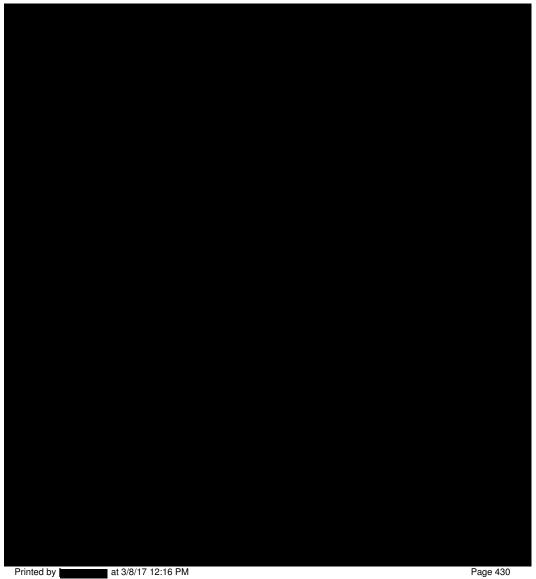
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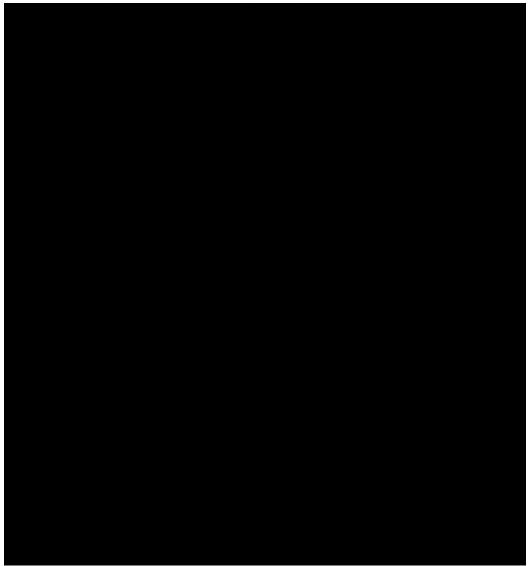
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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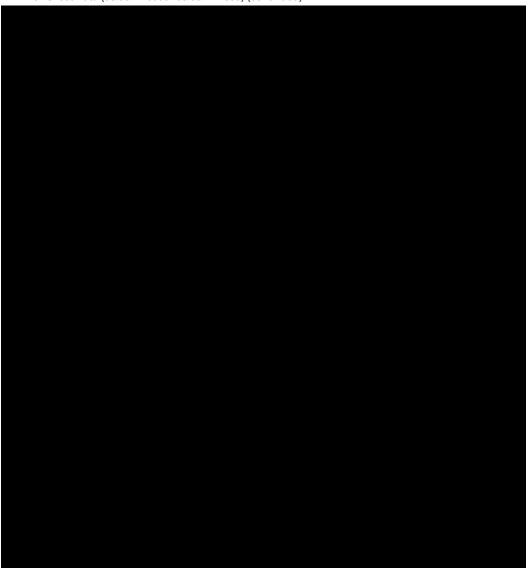
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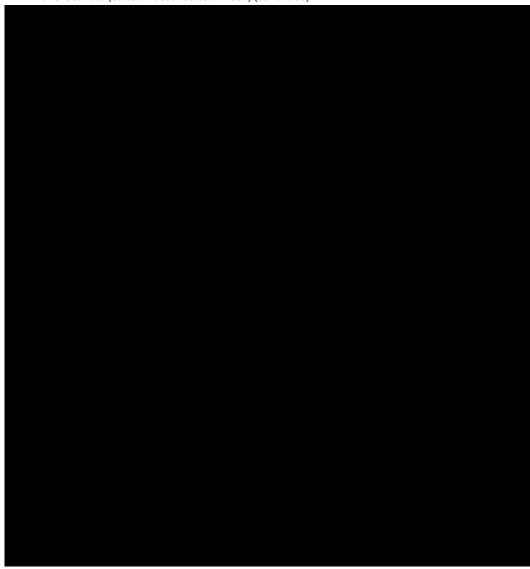
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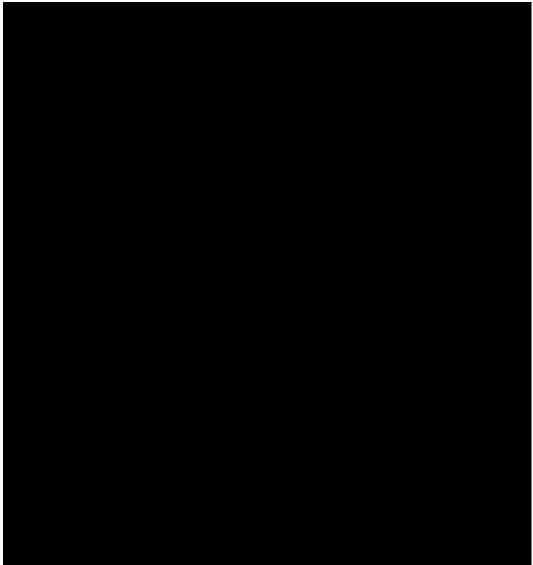
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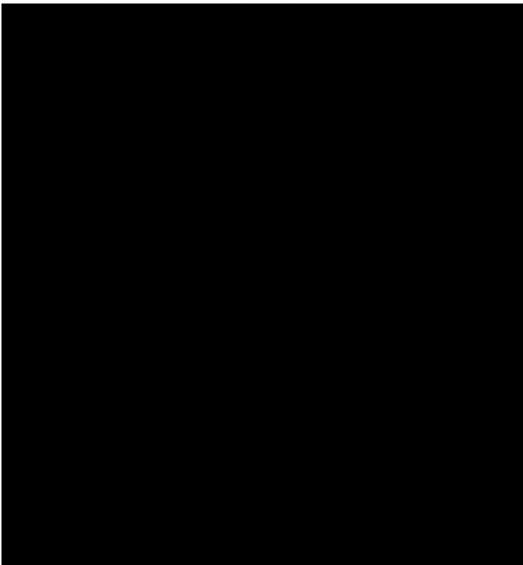
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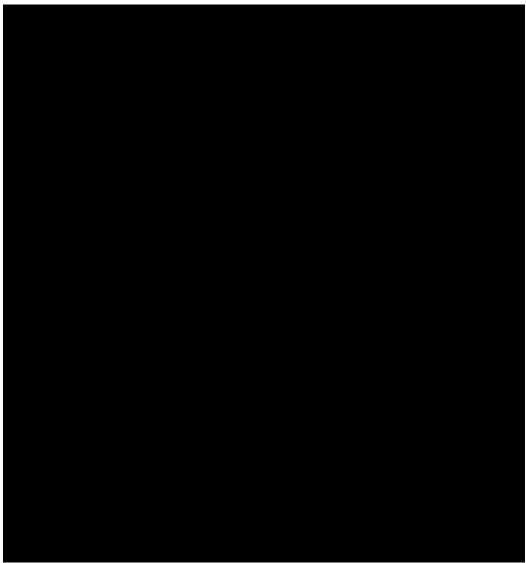
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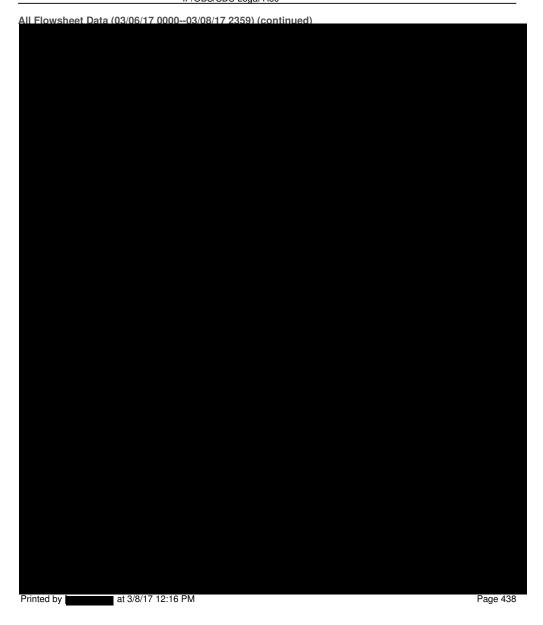
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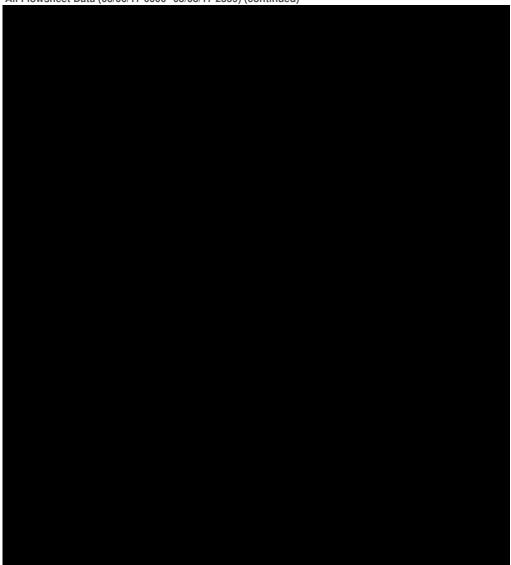
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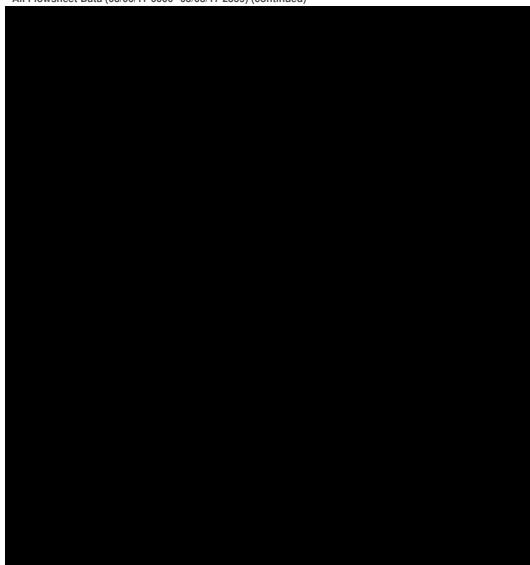
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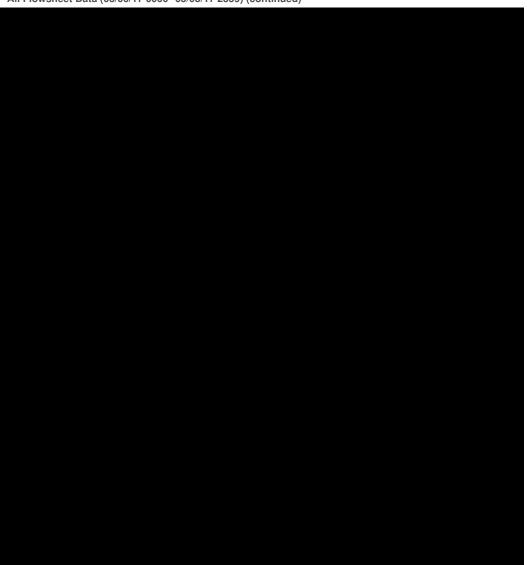
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued) Page 442

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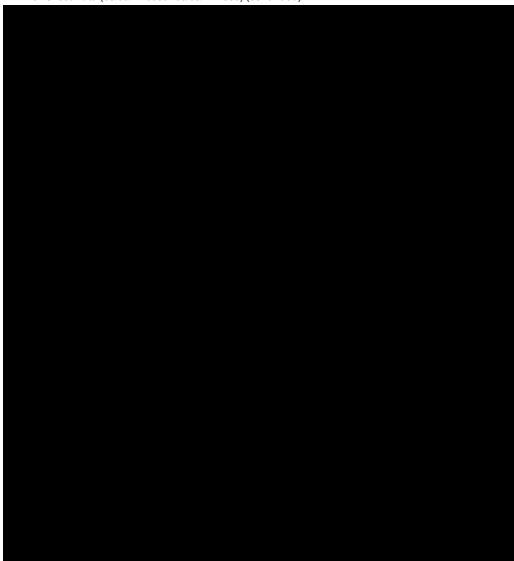
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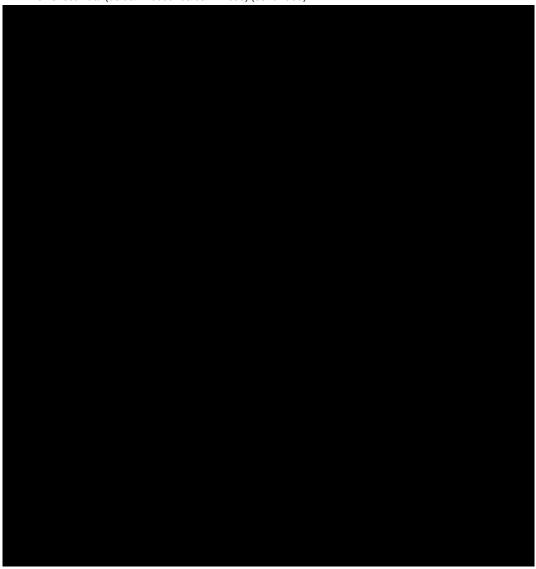
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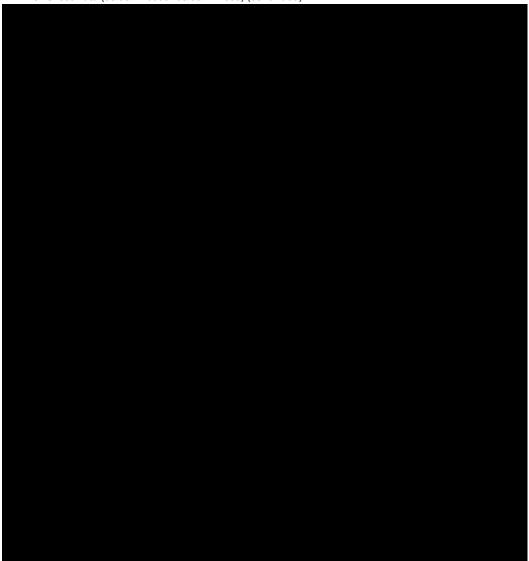
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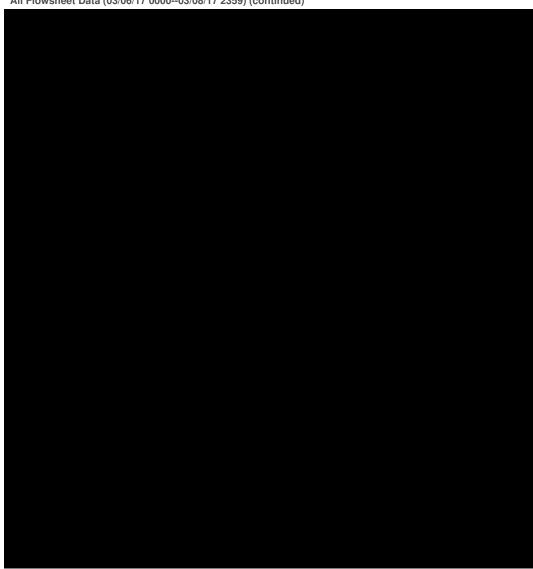
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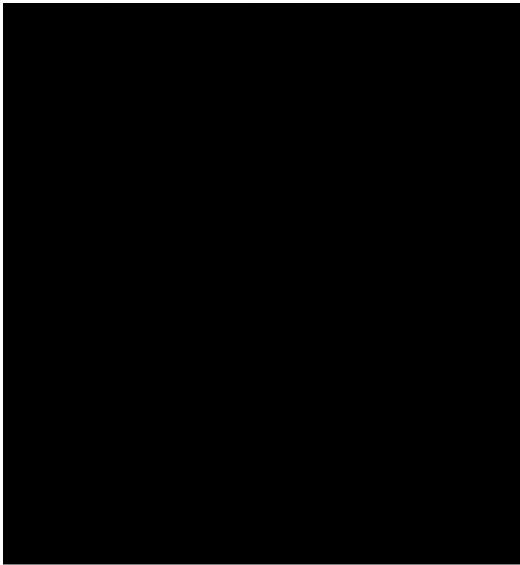
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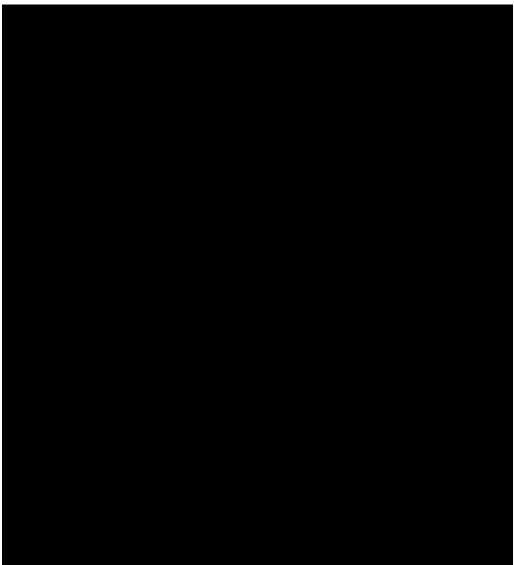
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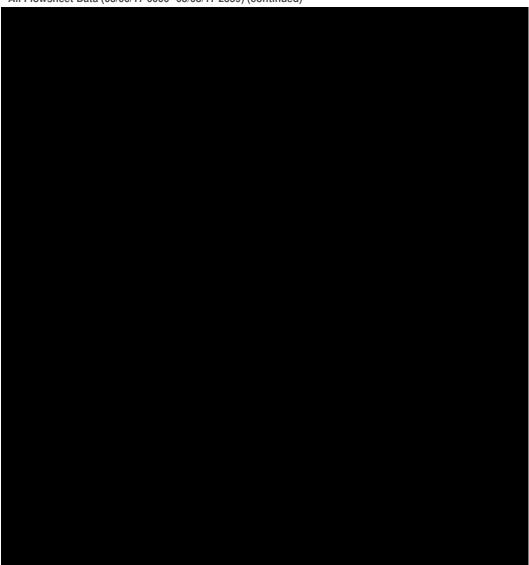
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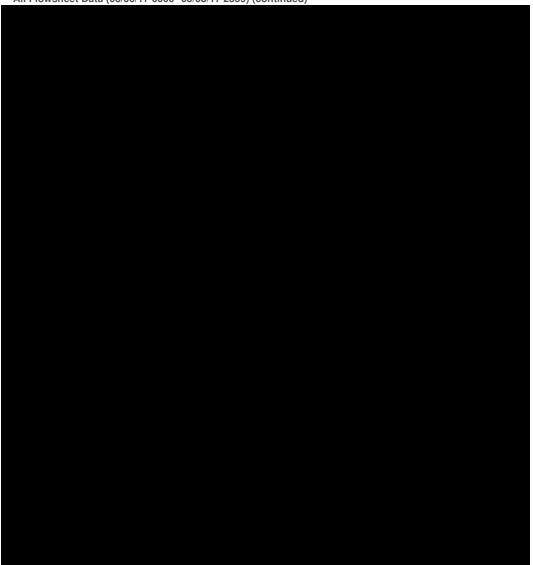
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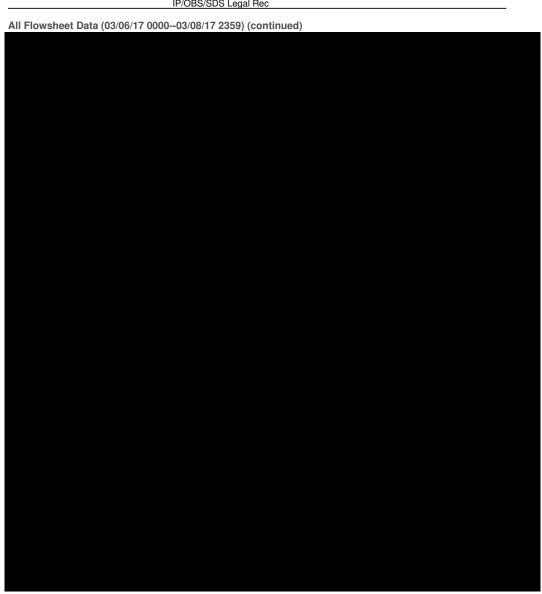
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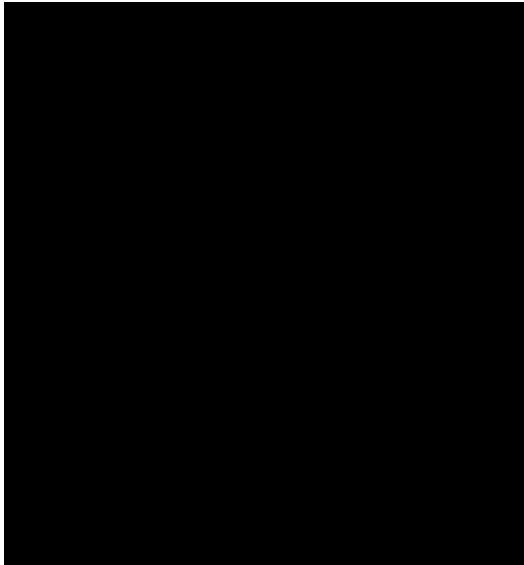
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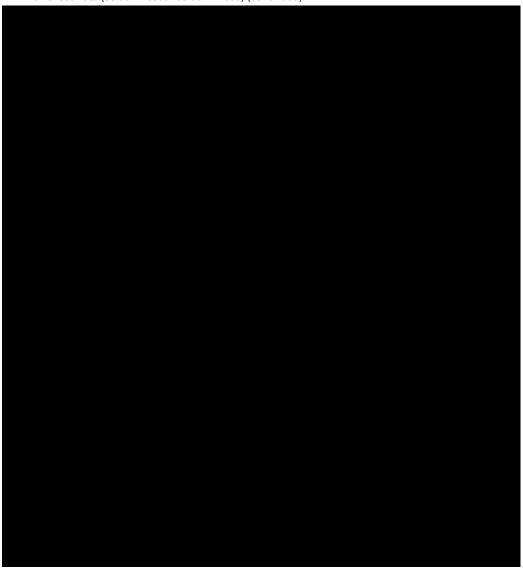
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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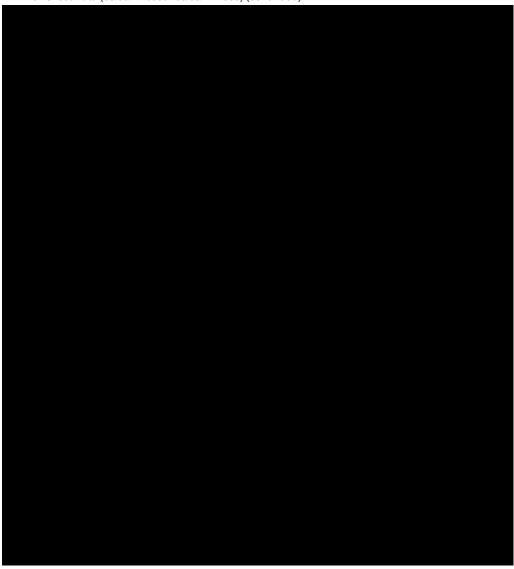
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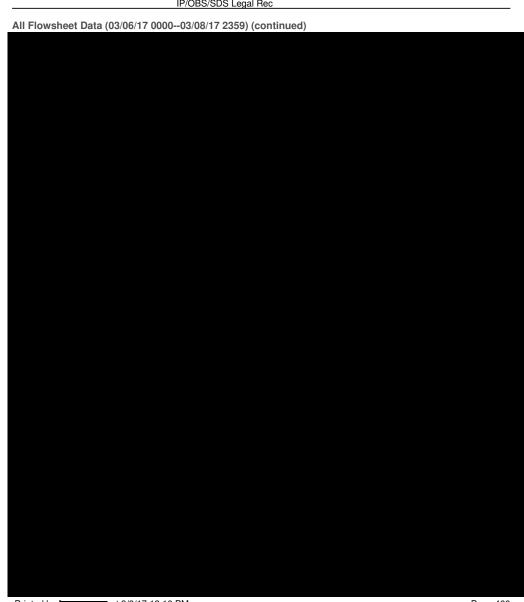
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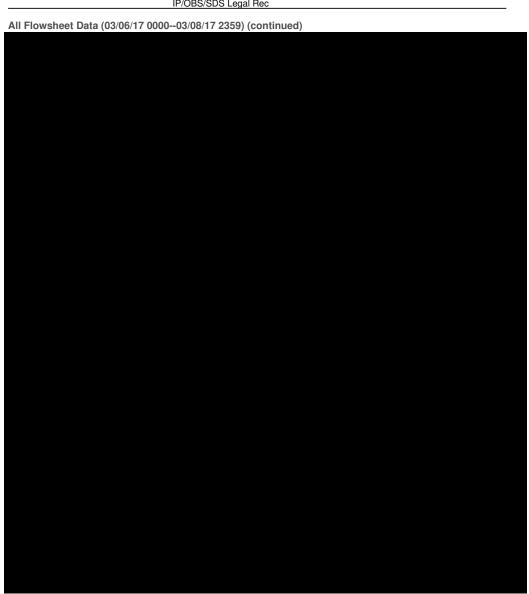
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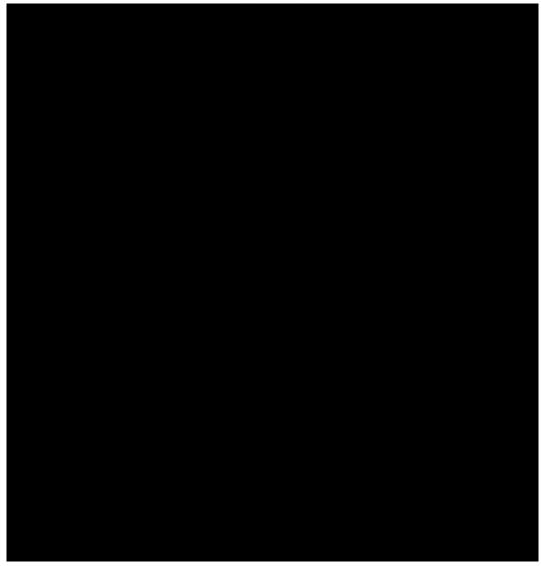
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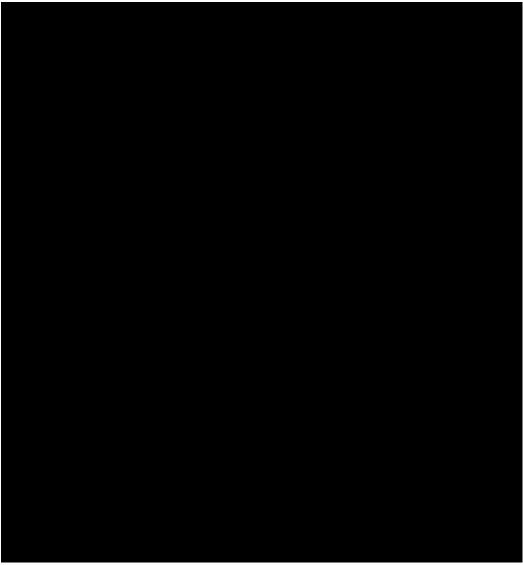
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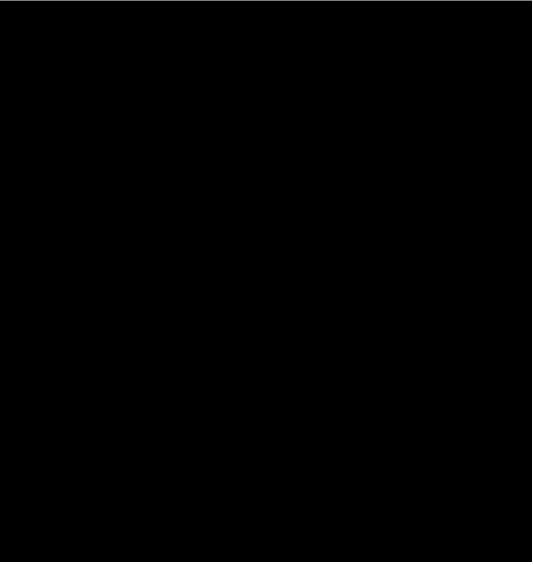
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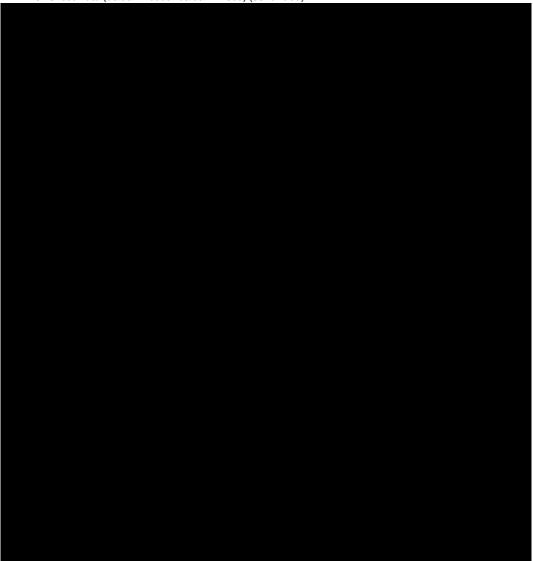
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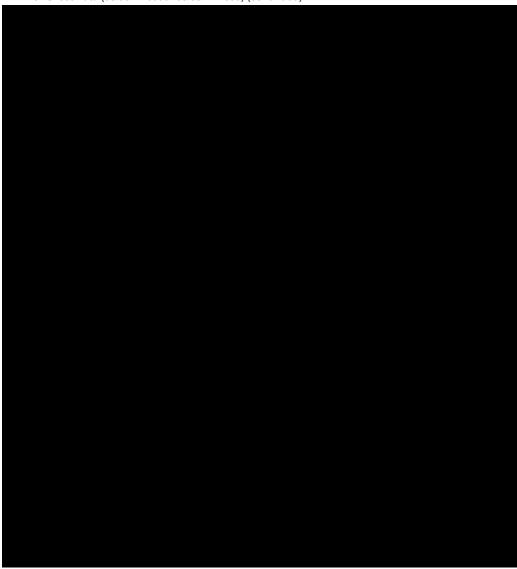
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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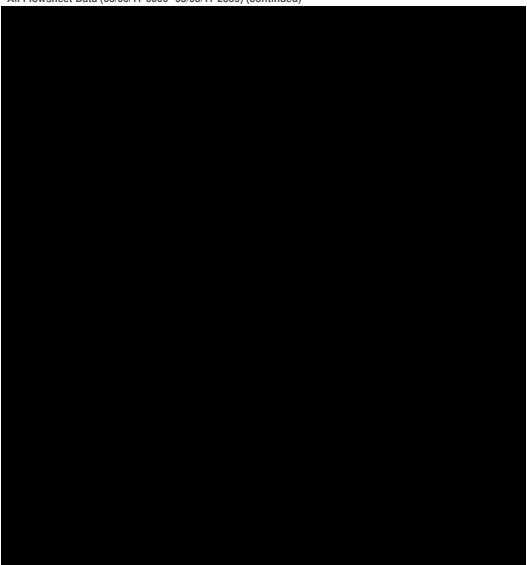
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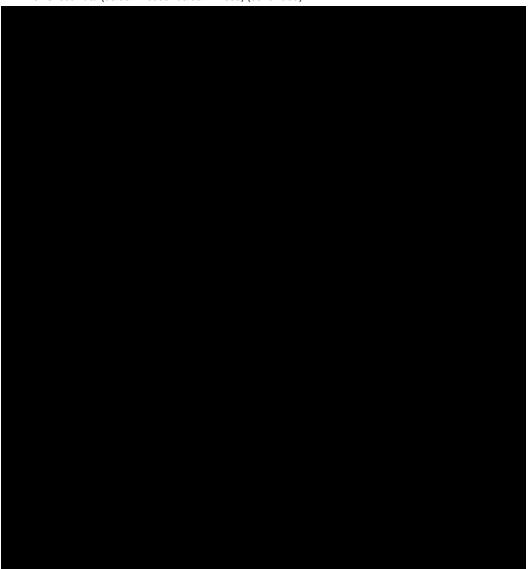
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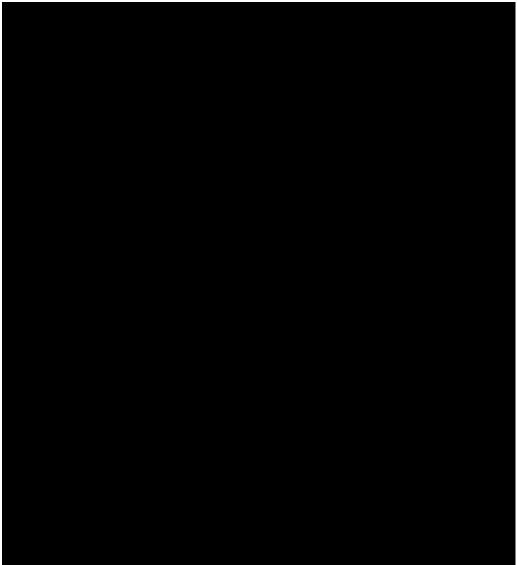
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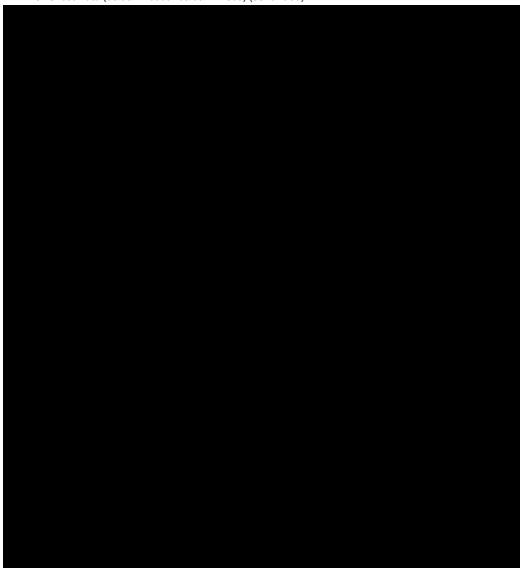
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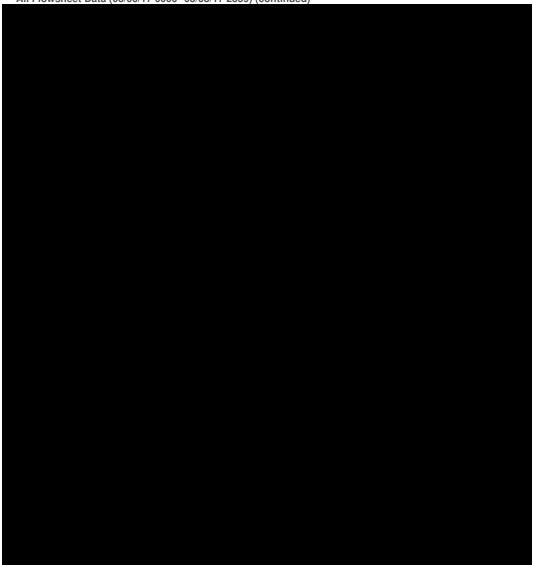
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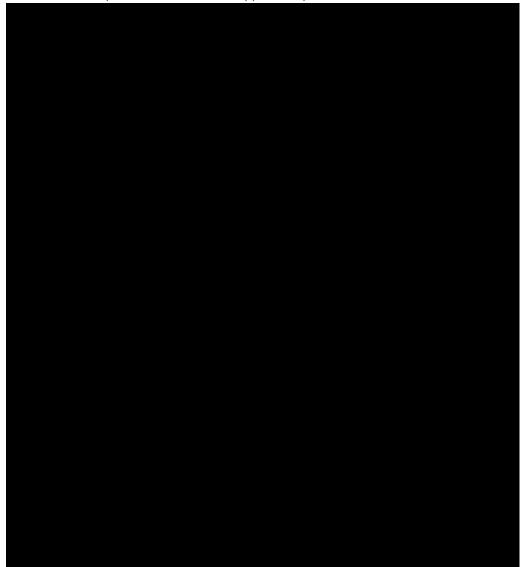
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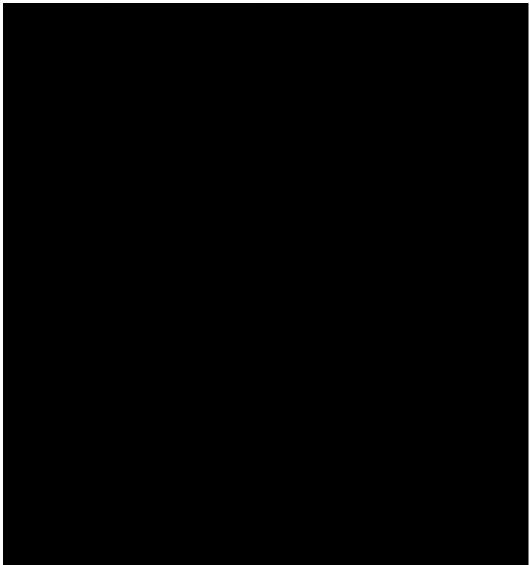
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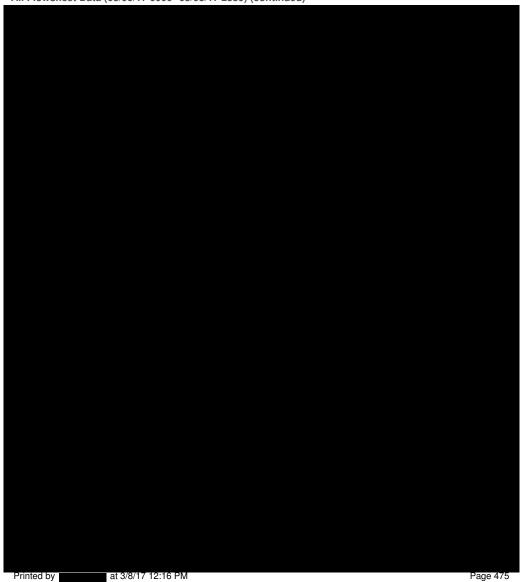
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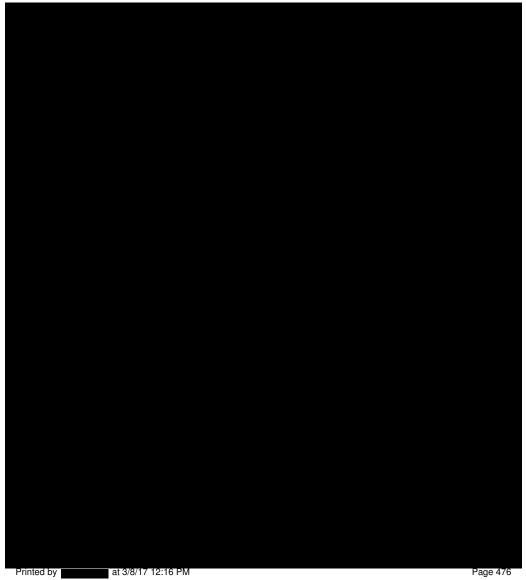
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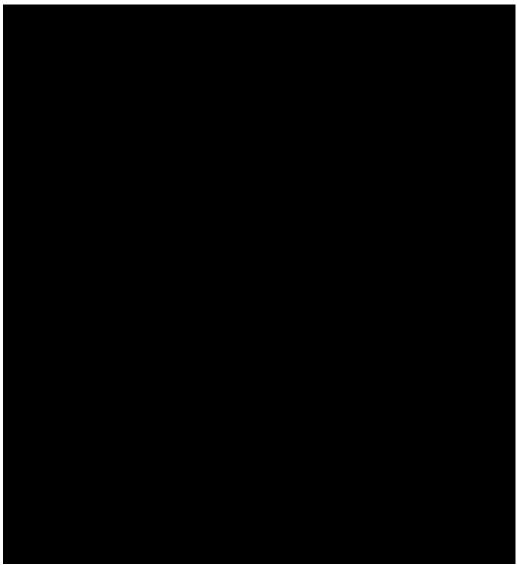
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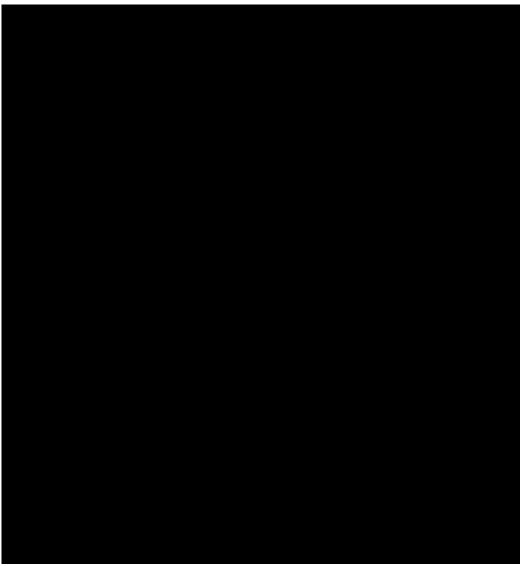
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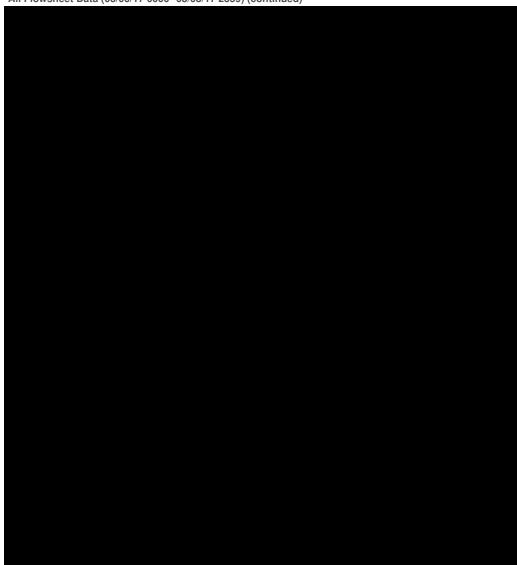
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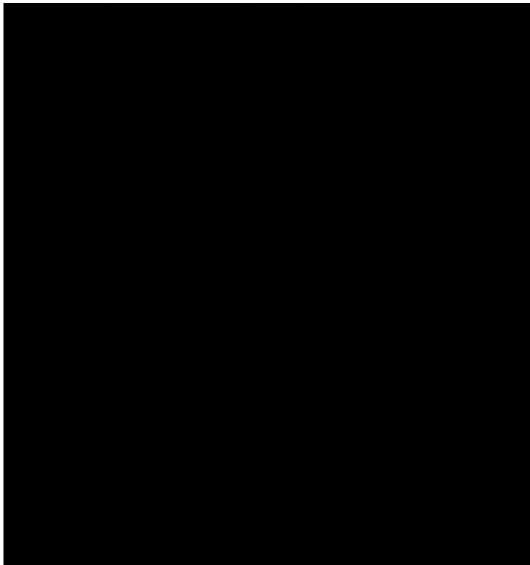
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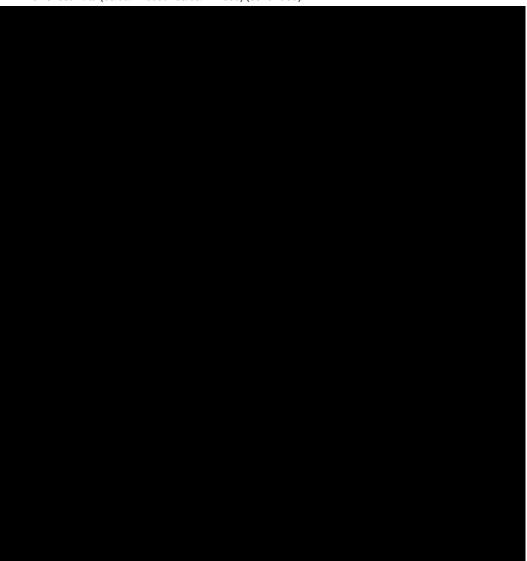
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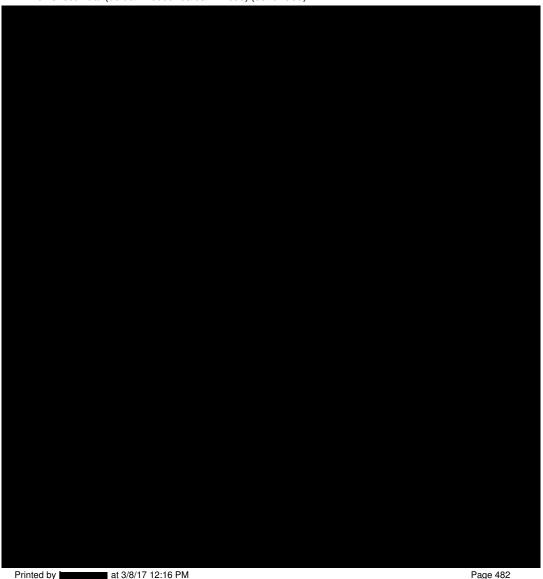
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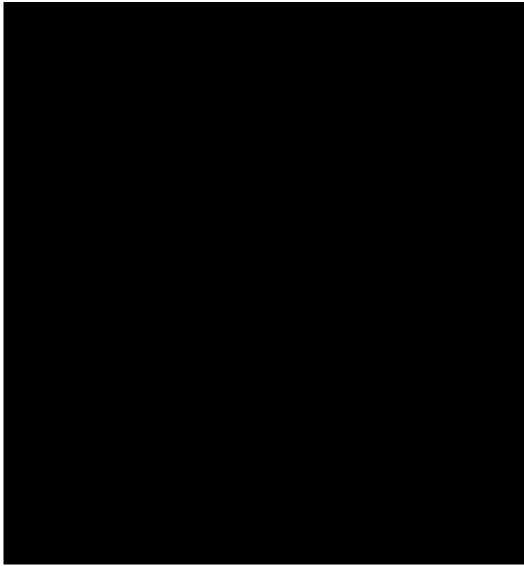
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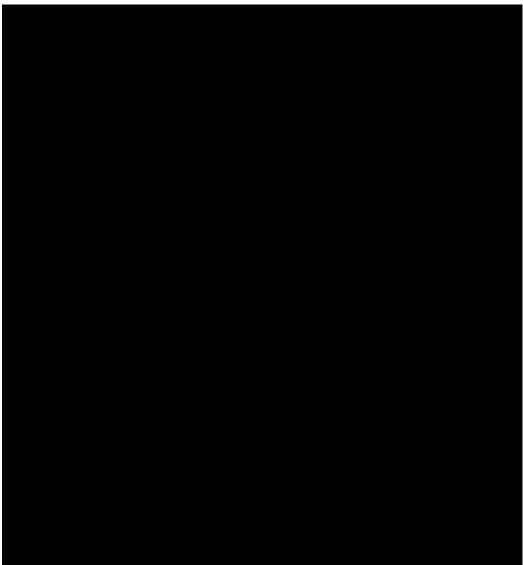
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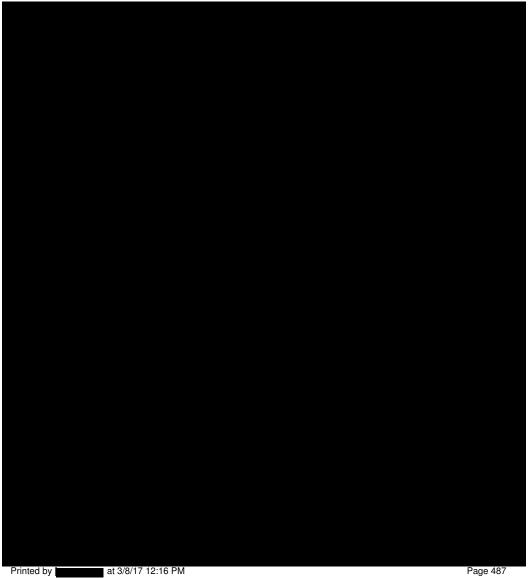
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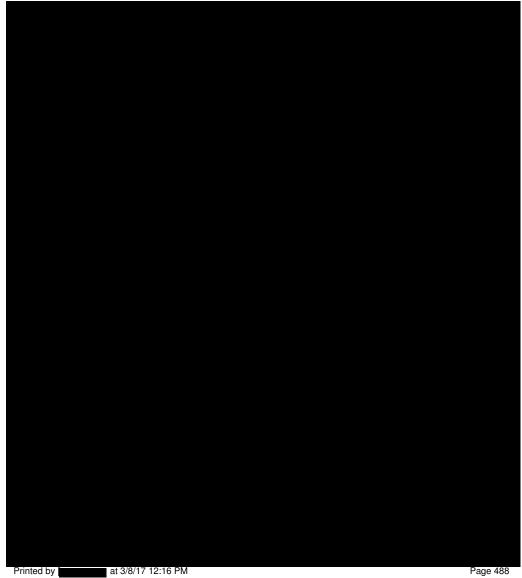
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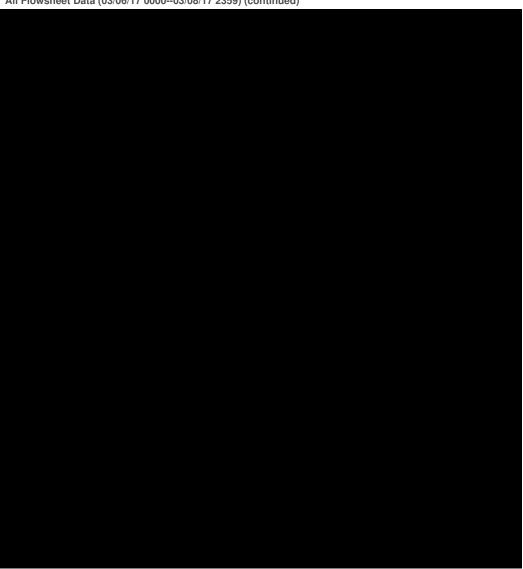
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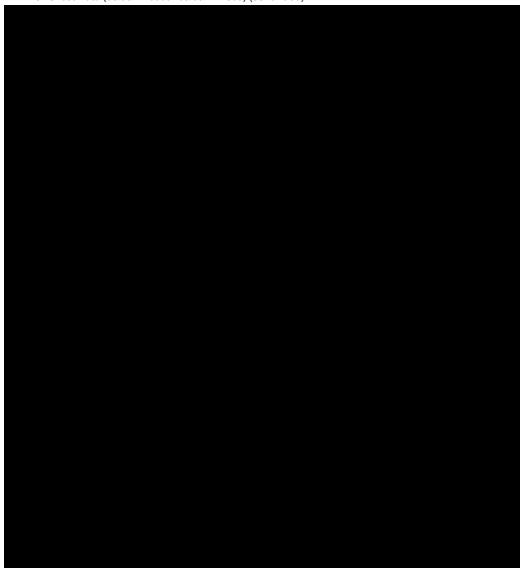
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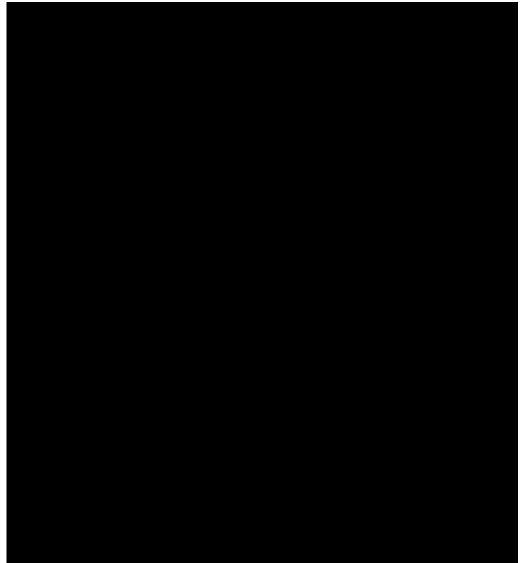
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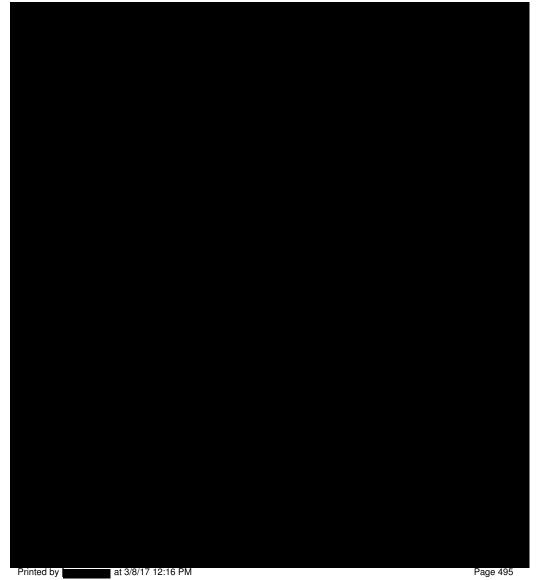
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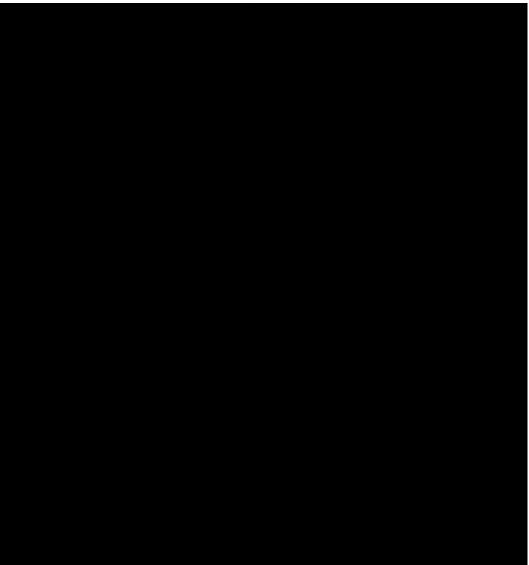
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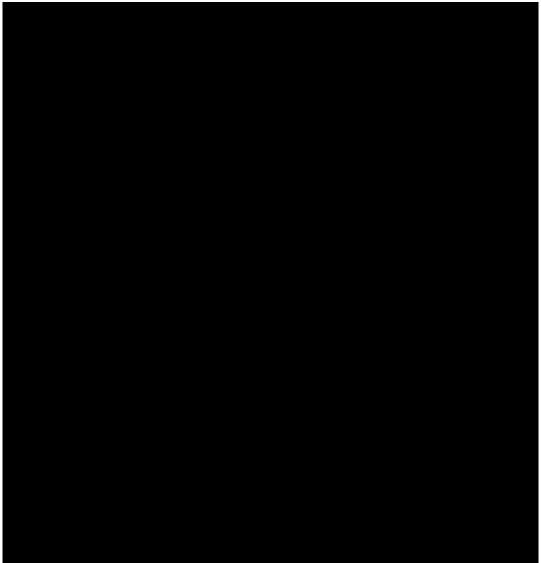
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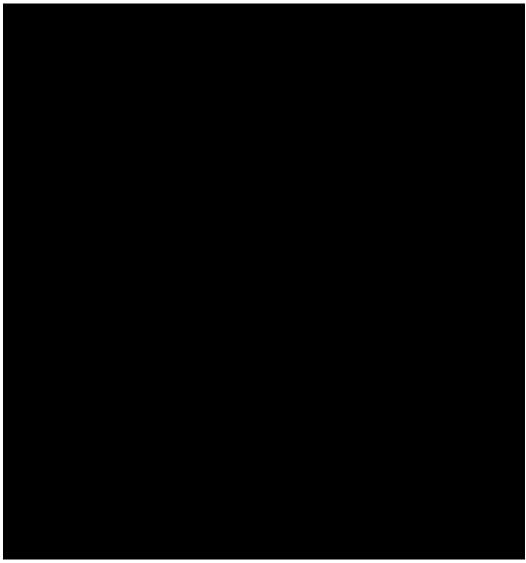
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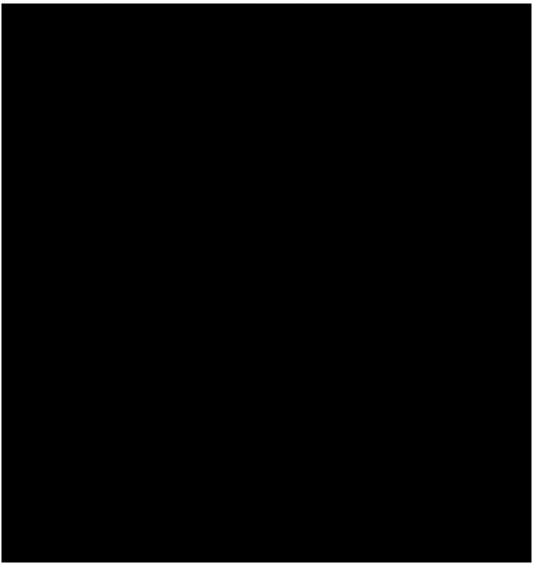
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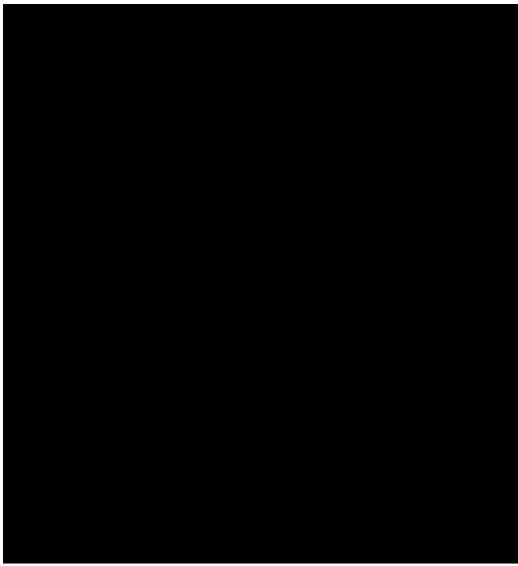
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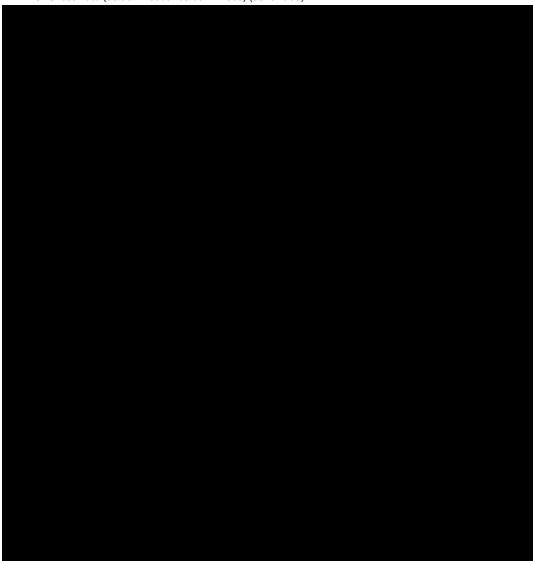
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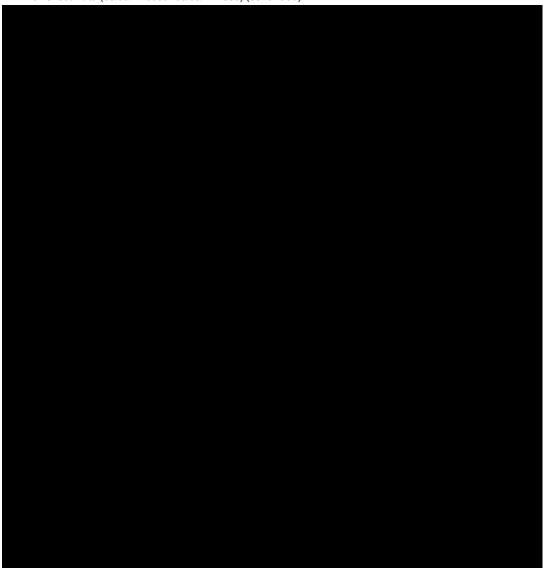
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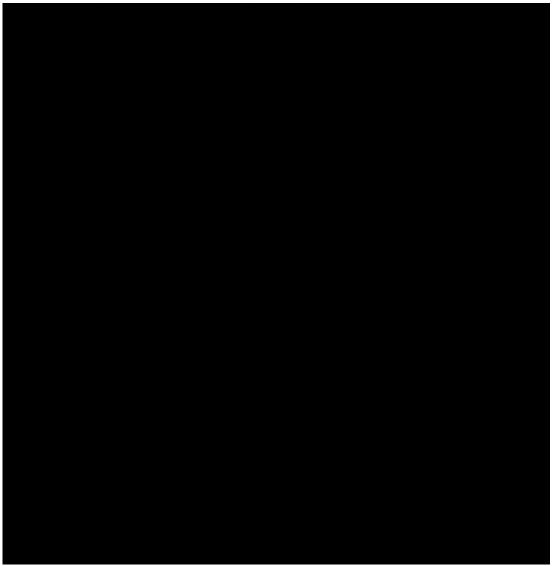
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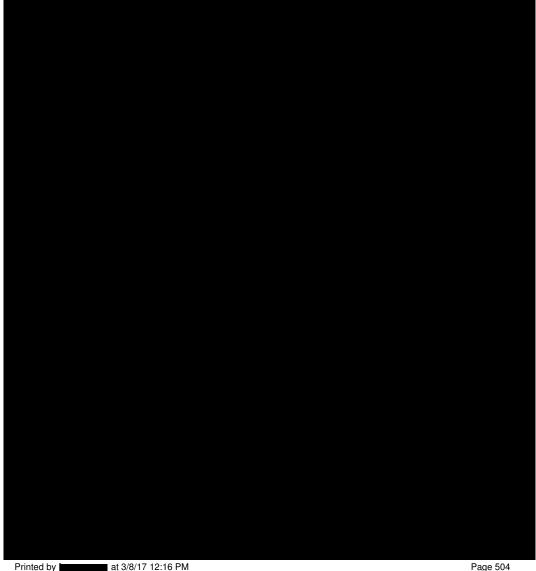
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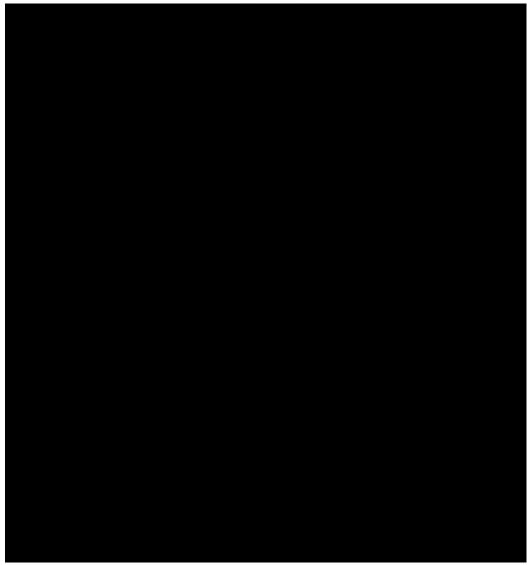
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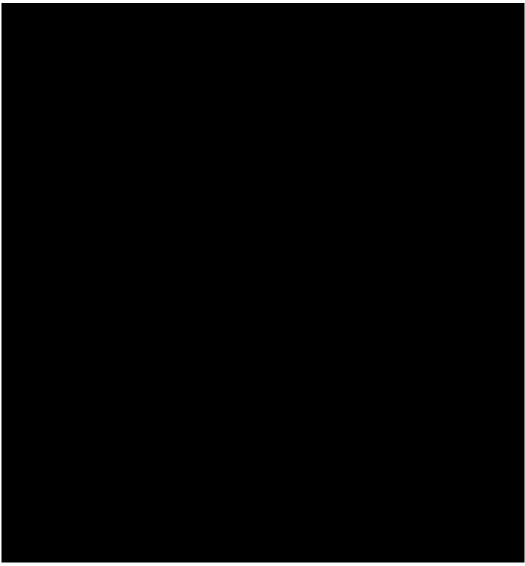
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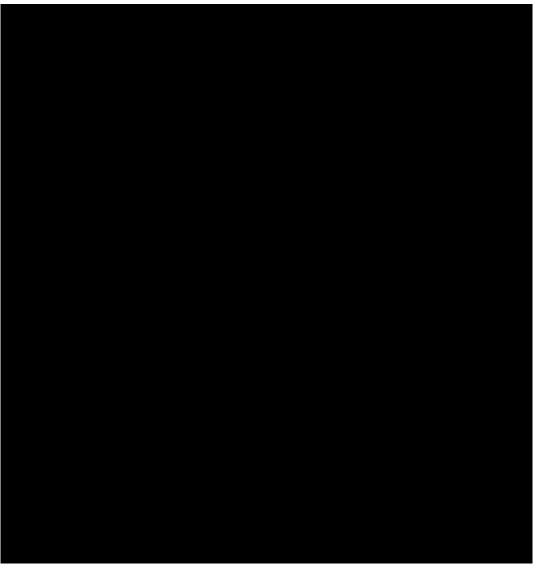
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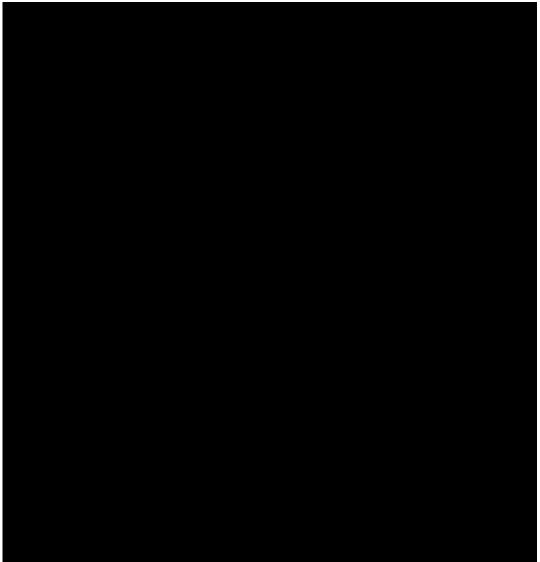
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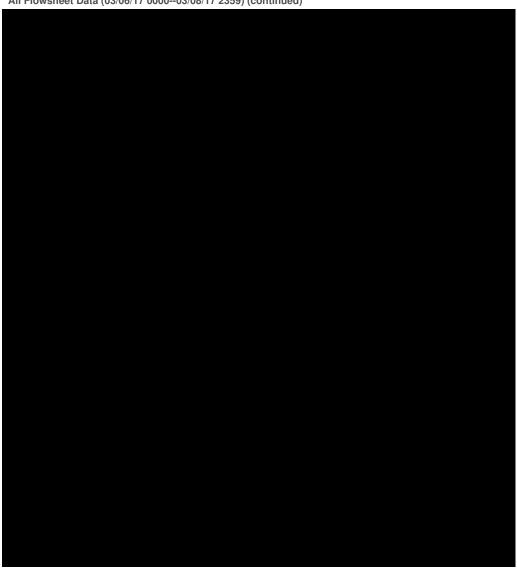
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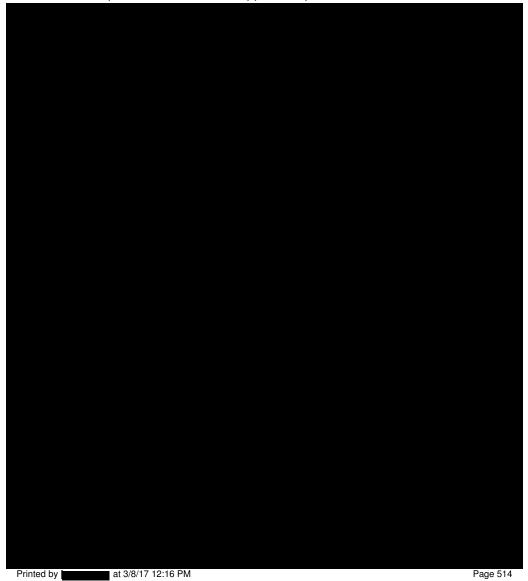
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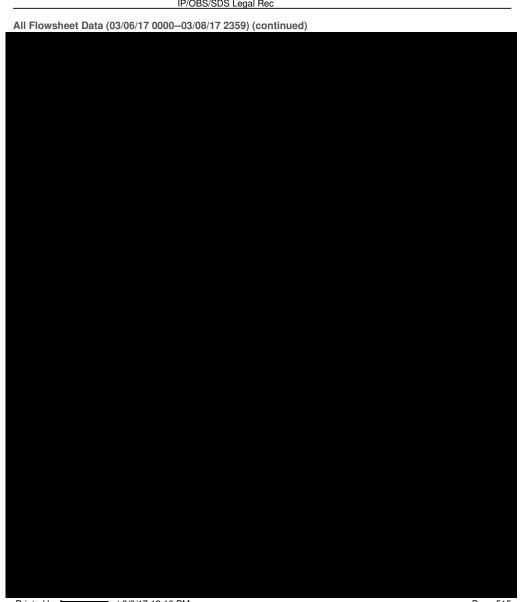
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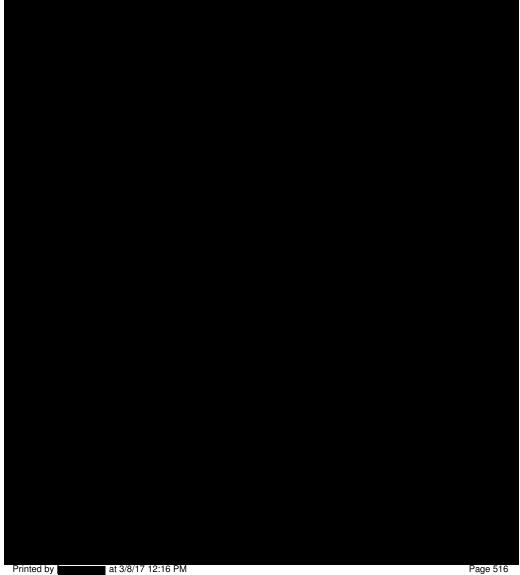
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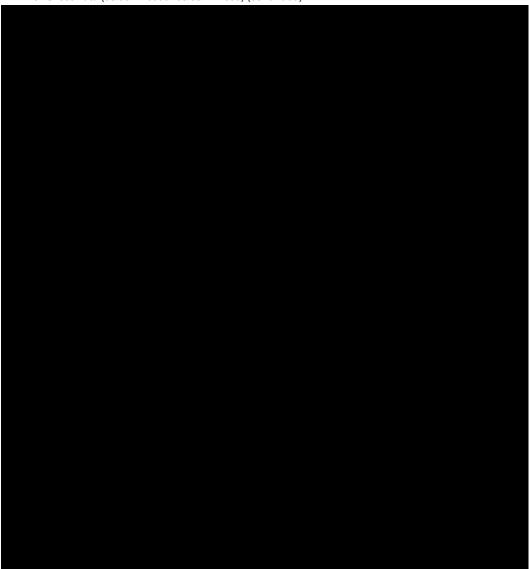
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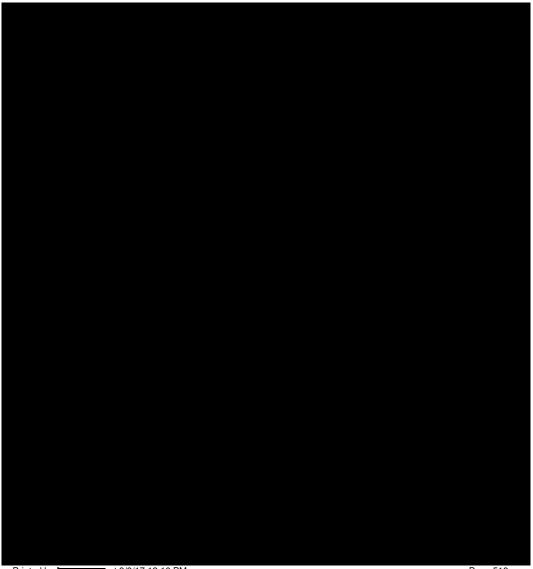
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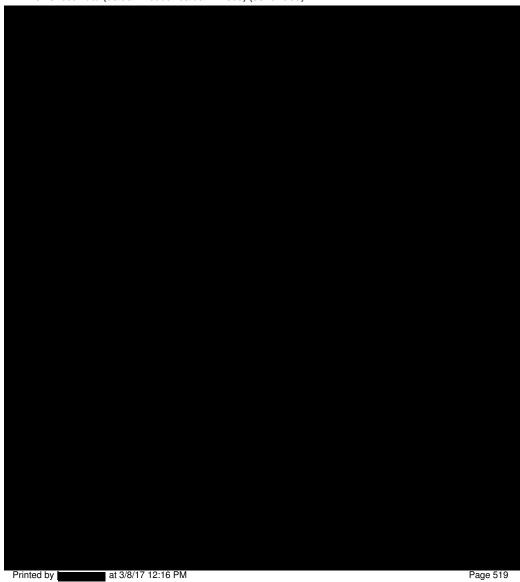
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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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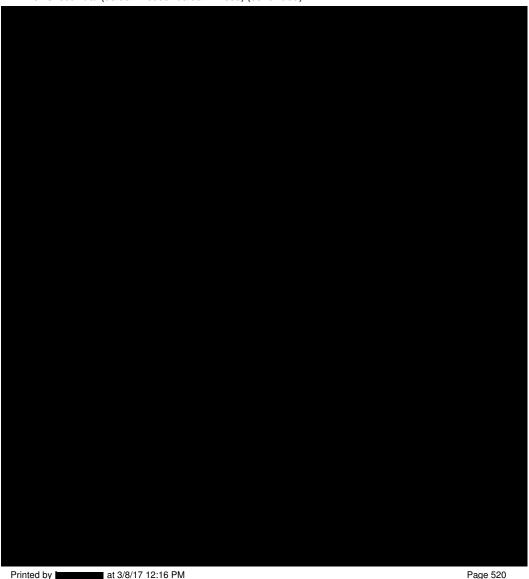
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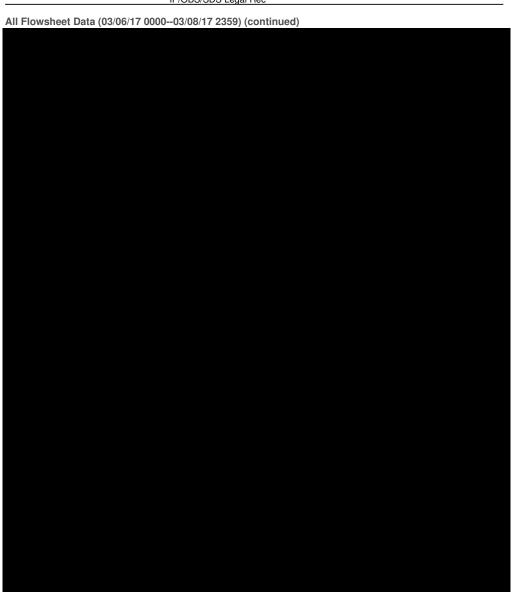
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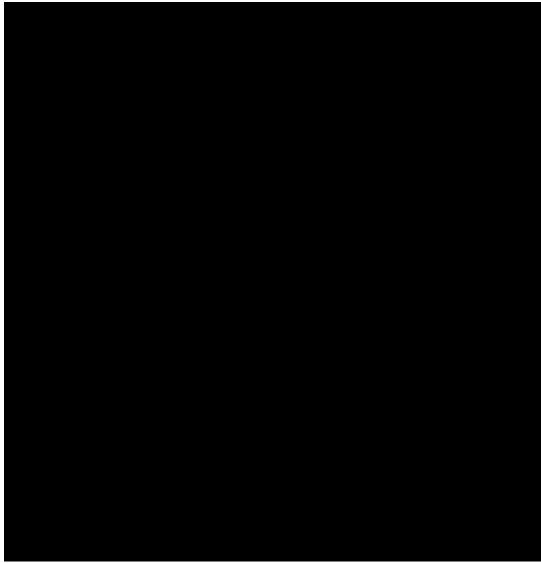
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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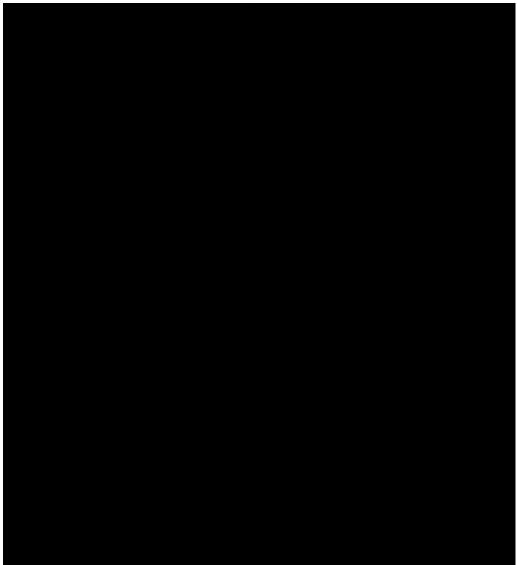
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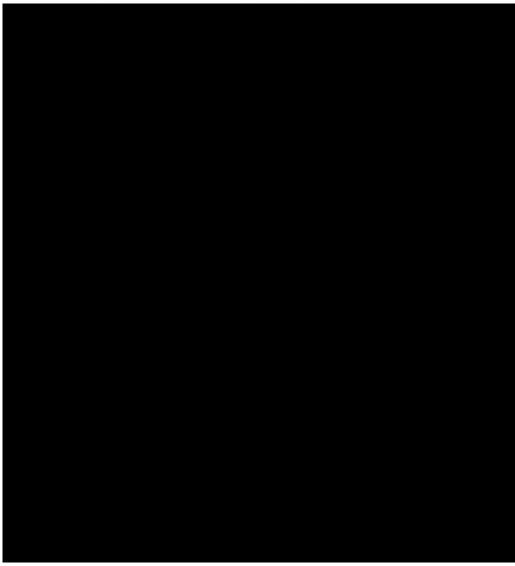
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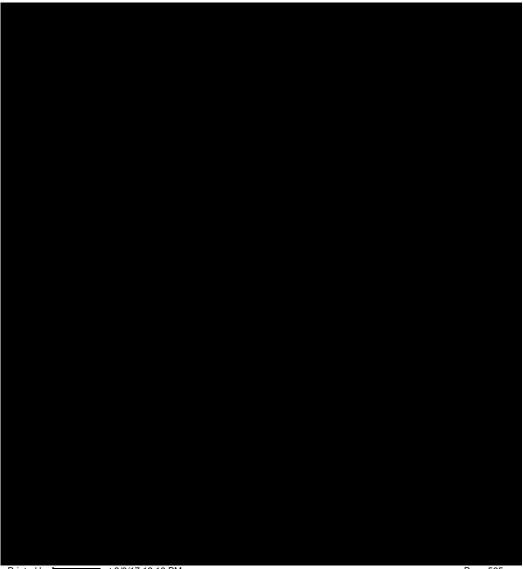
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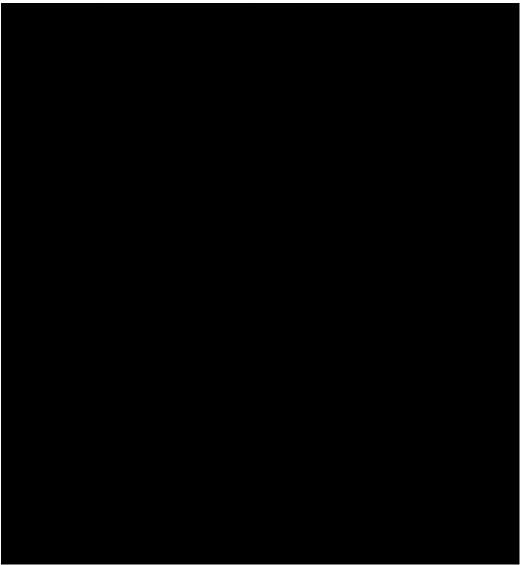
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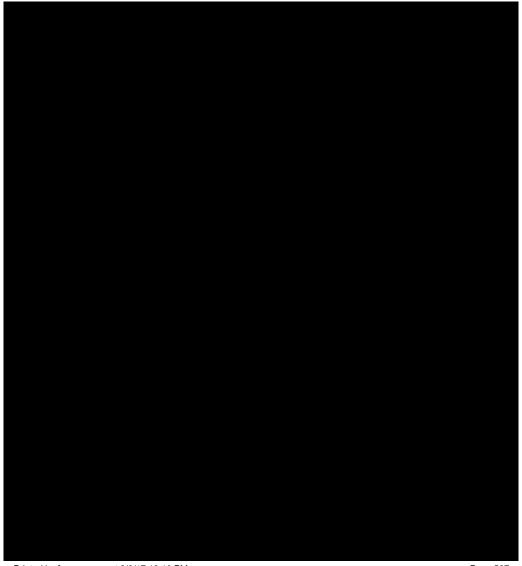
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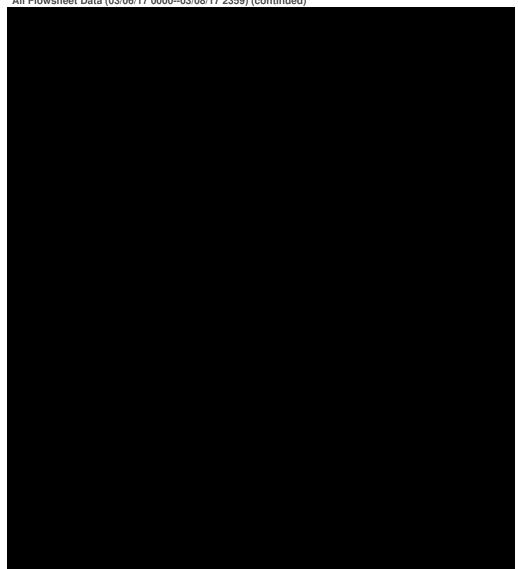
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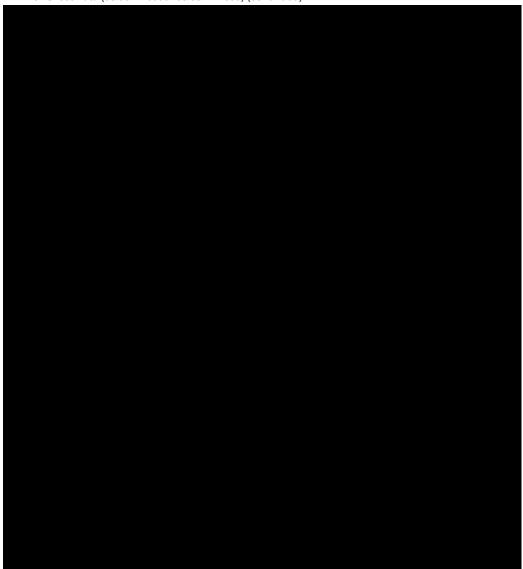
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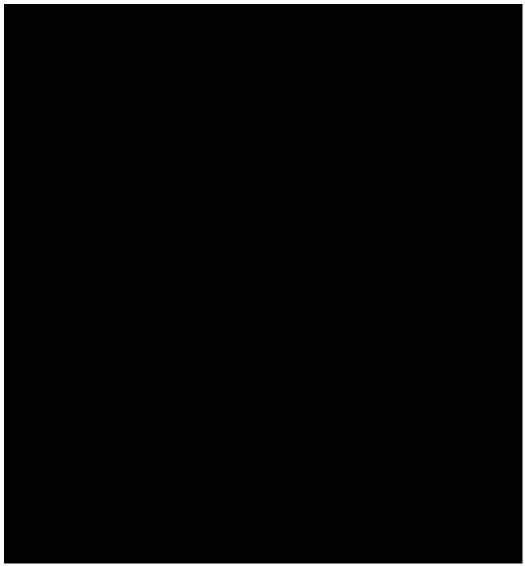
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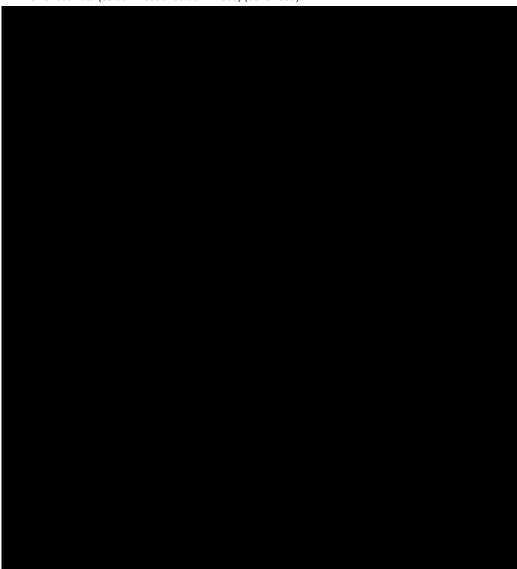
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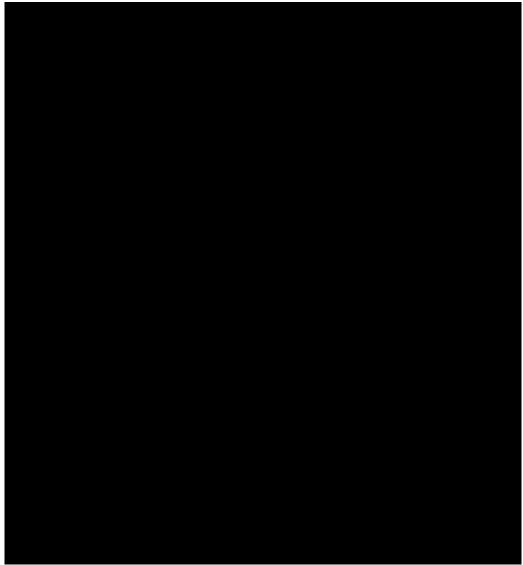
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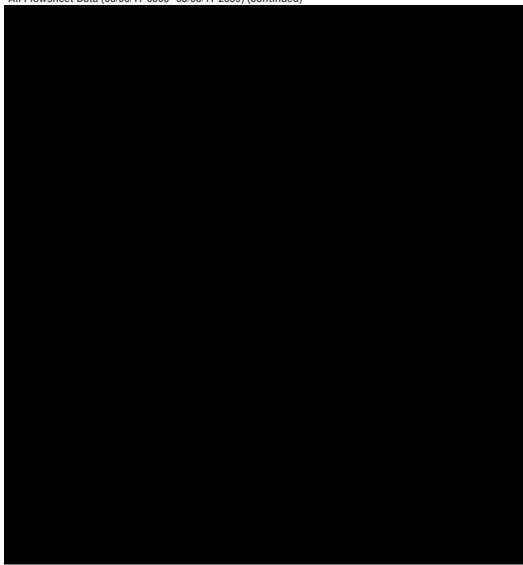
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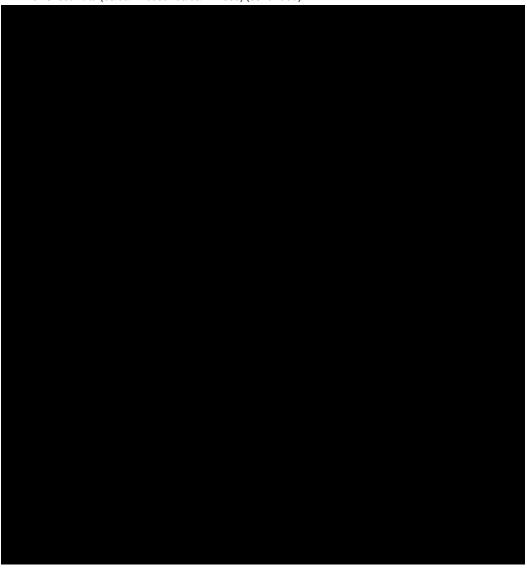
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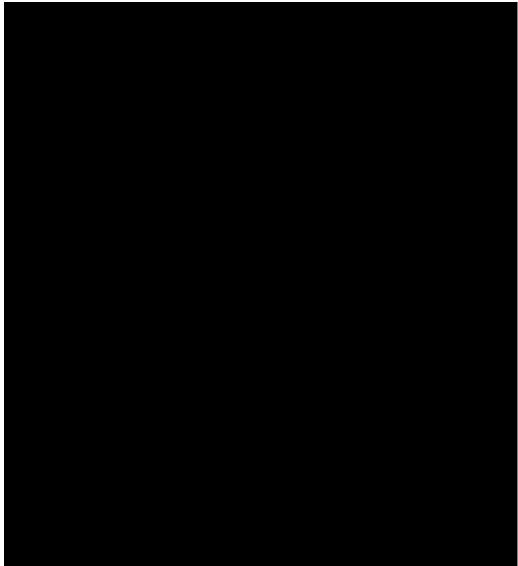
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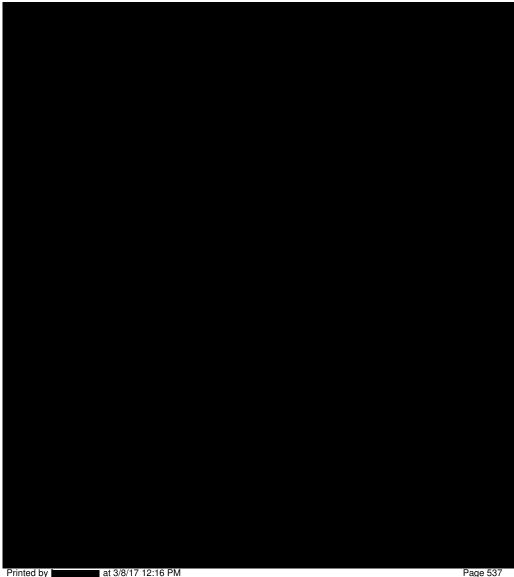
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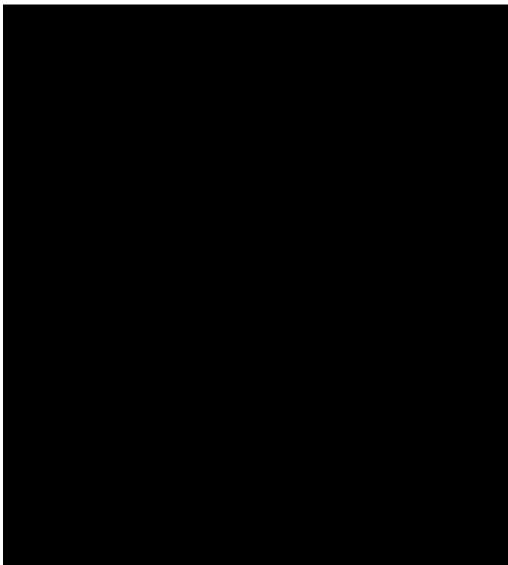
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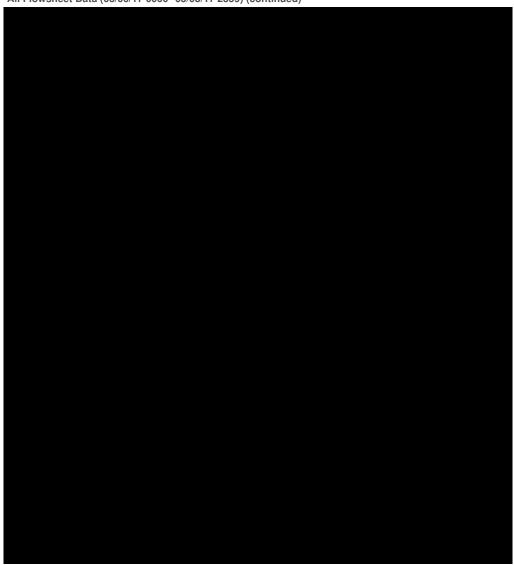
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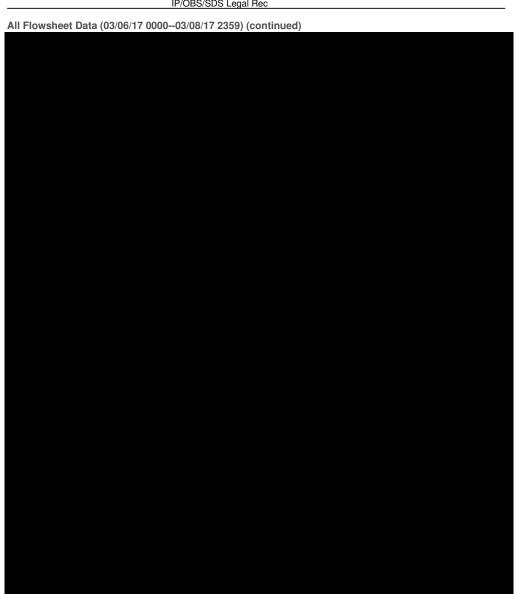
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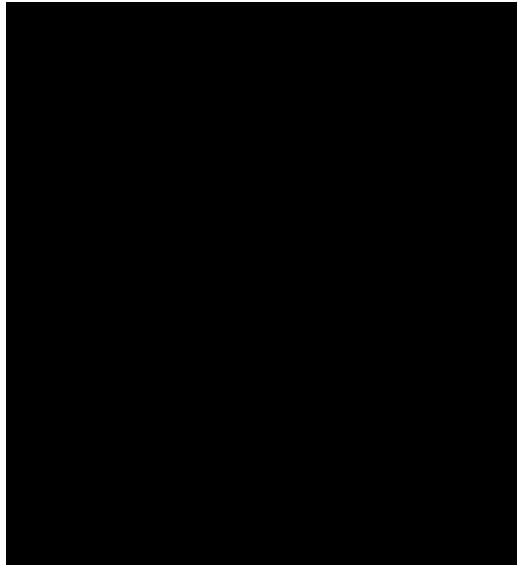
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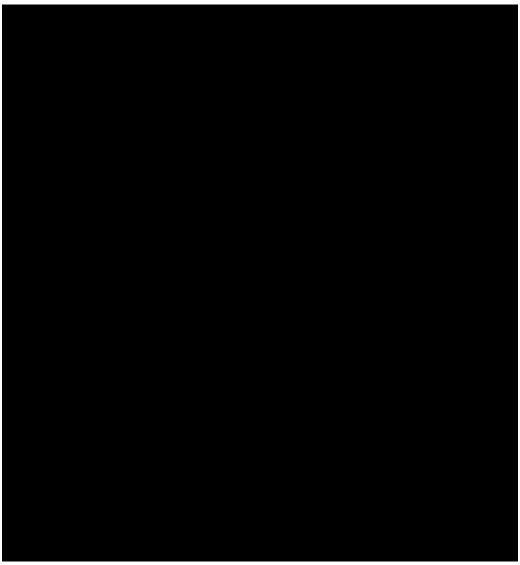
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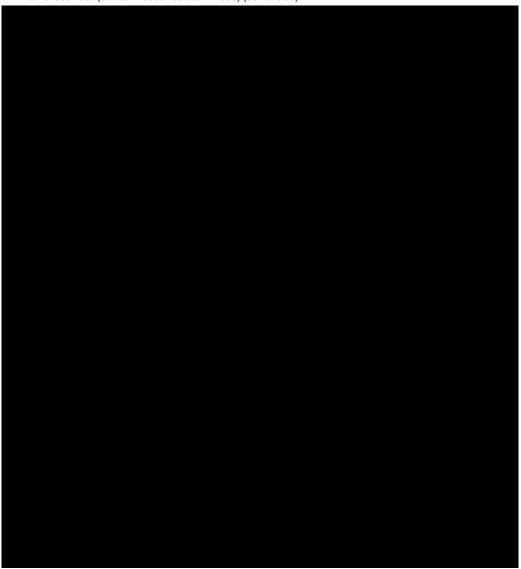
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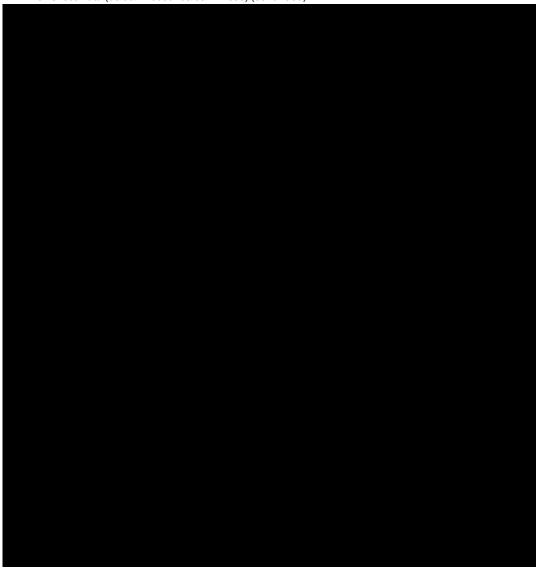
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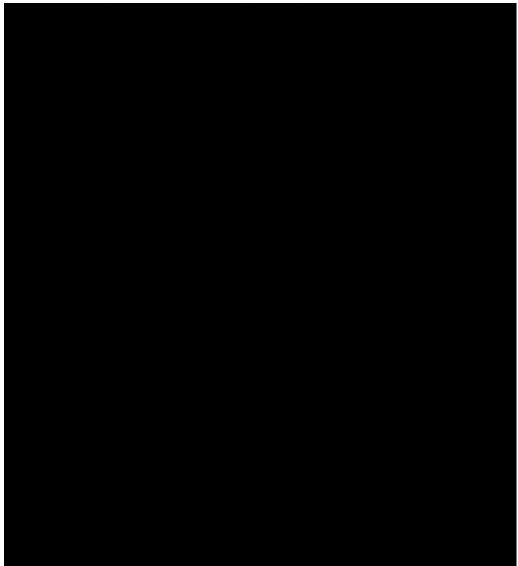
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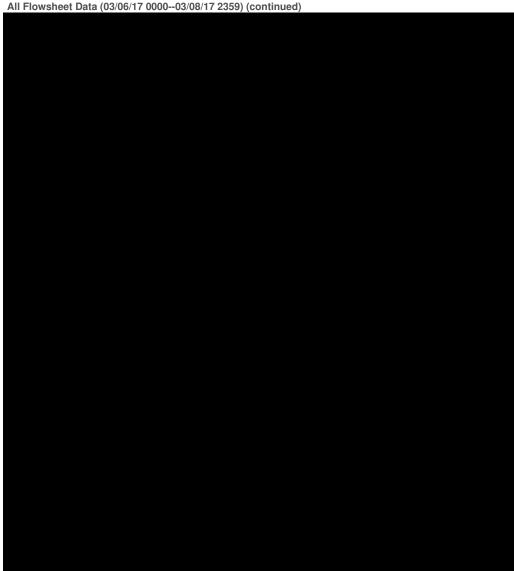
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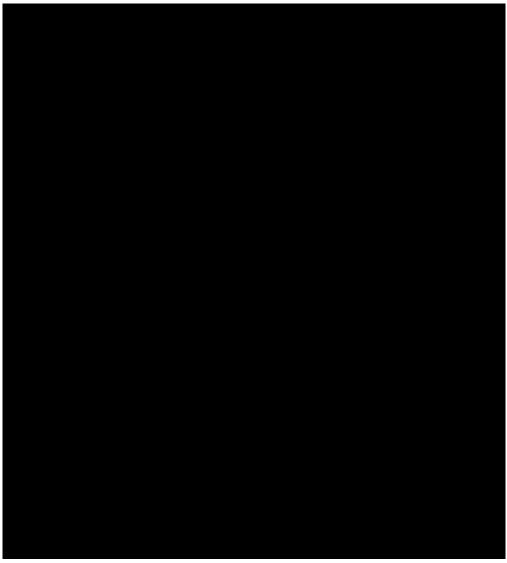
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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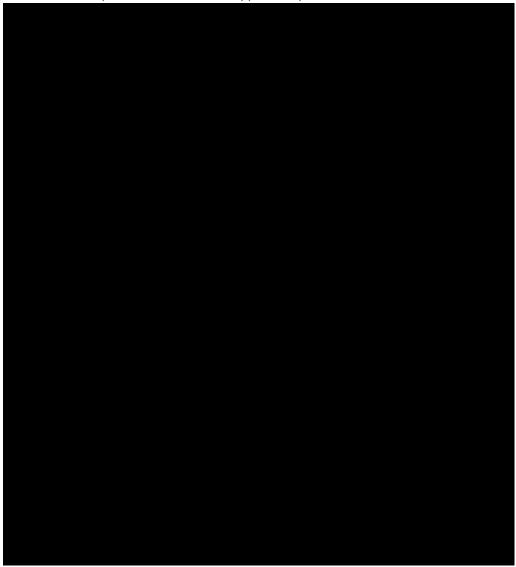
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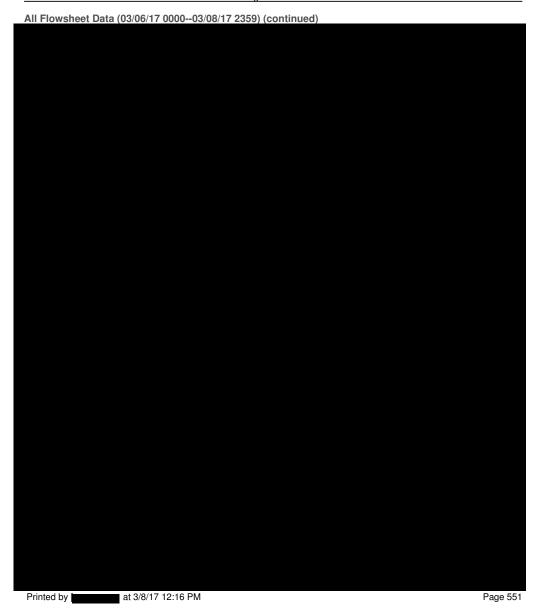
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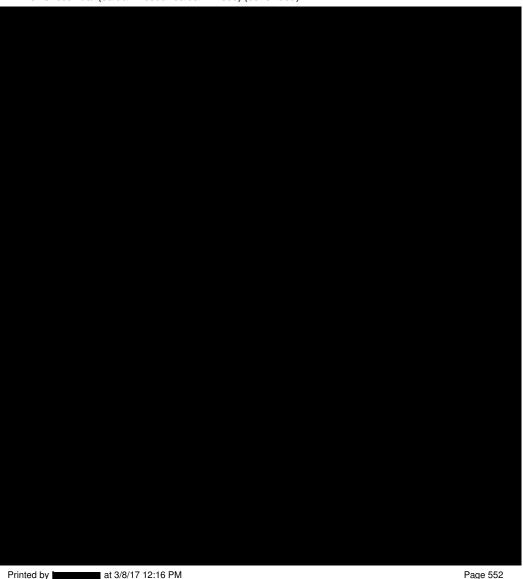
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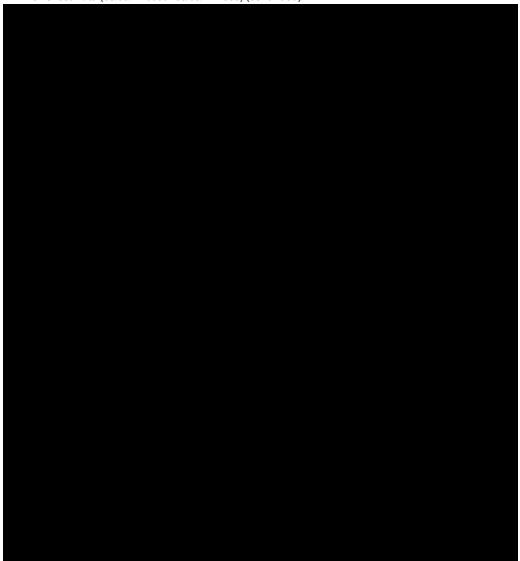
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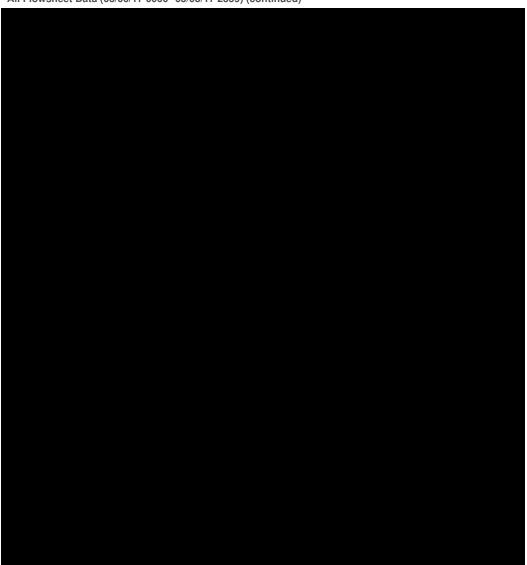
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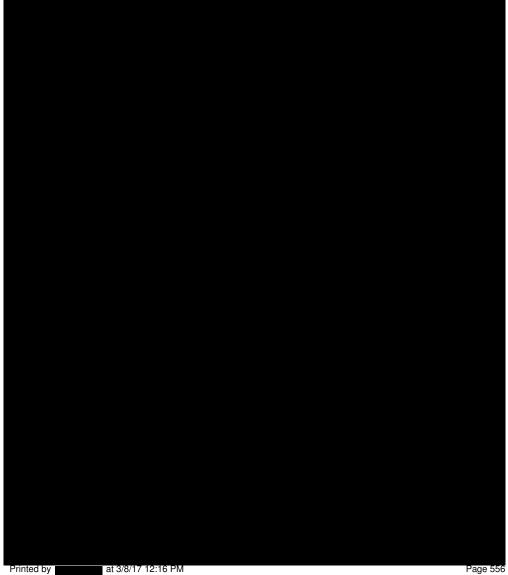
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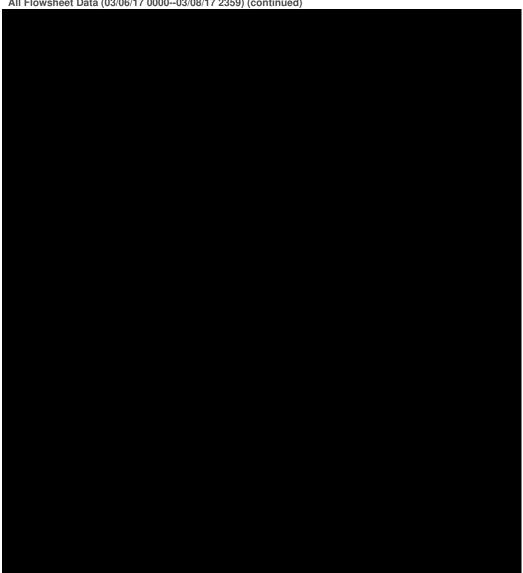
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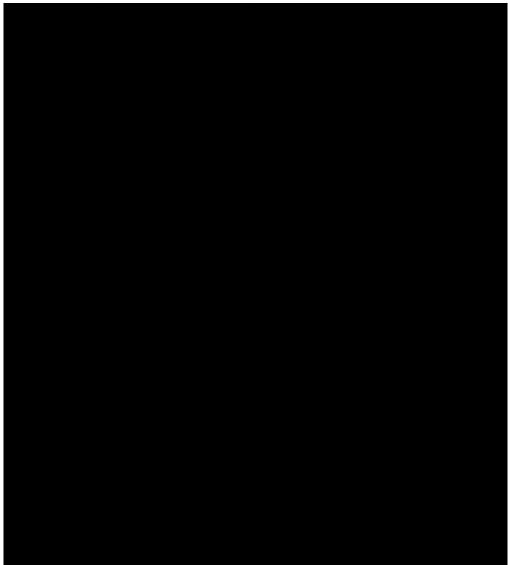
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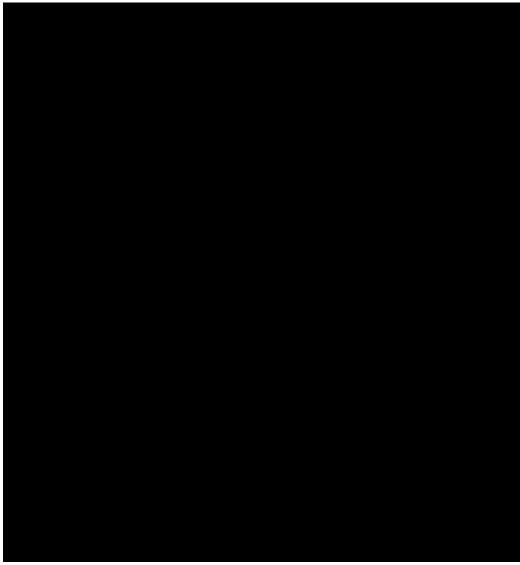
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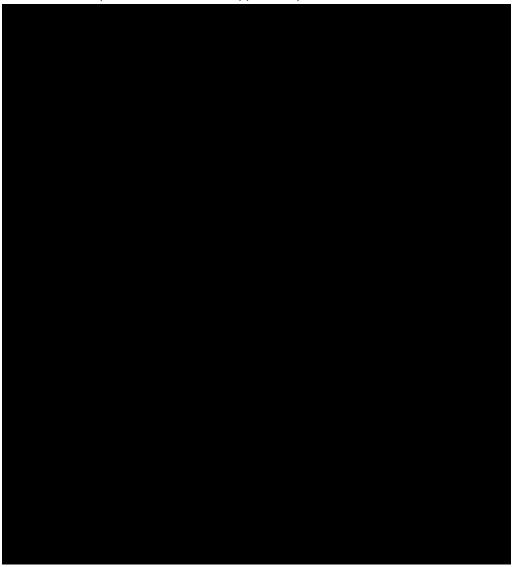
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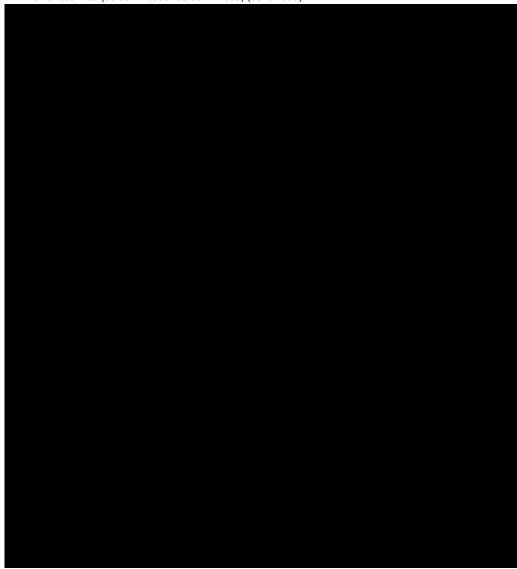
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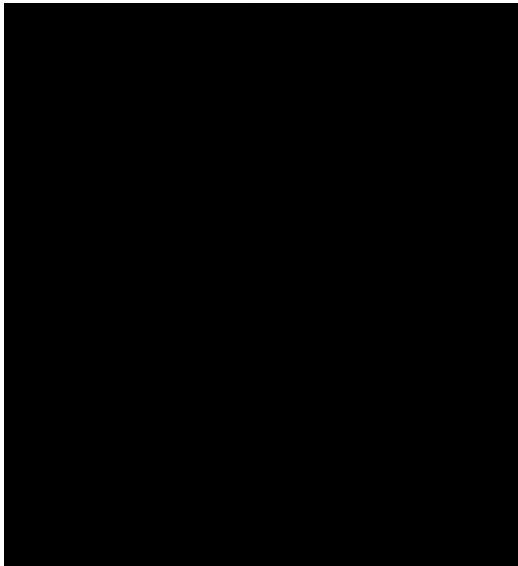
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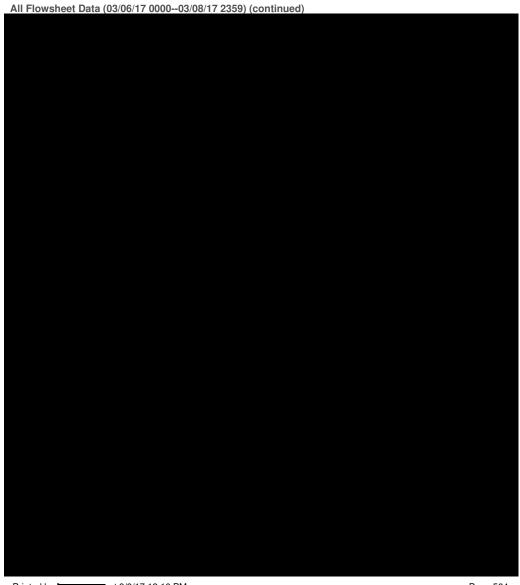
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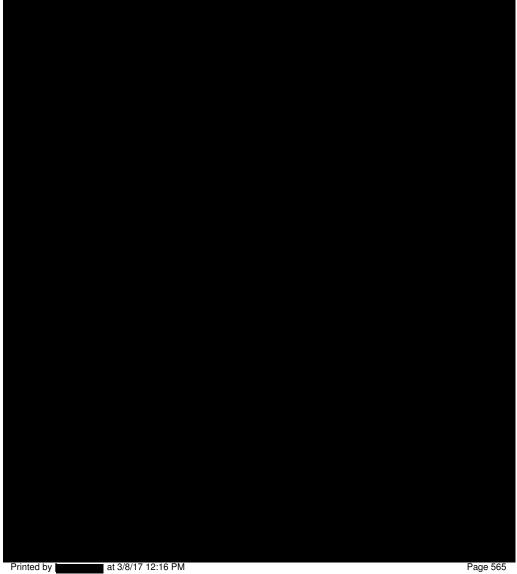
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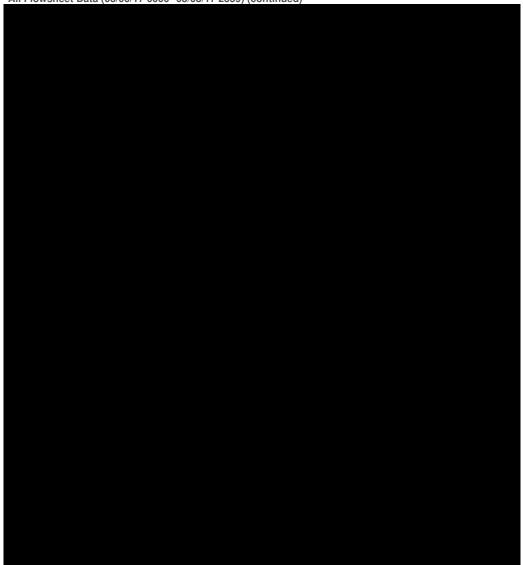
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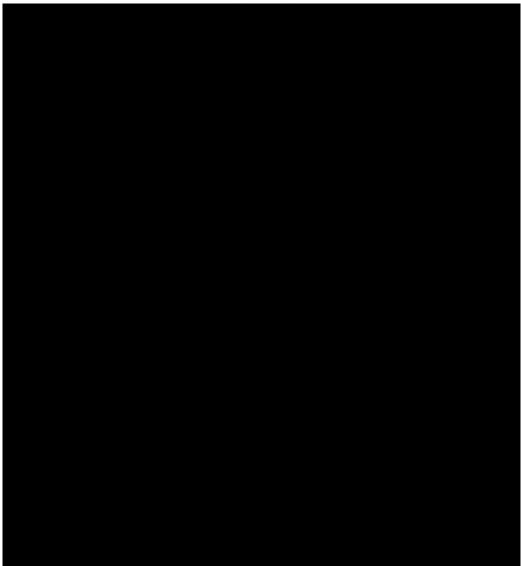
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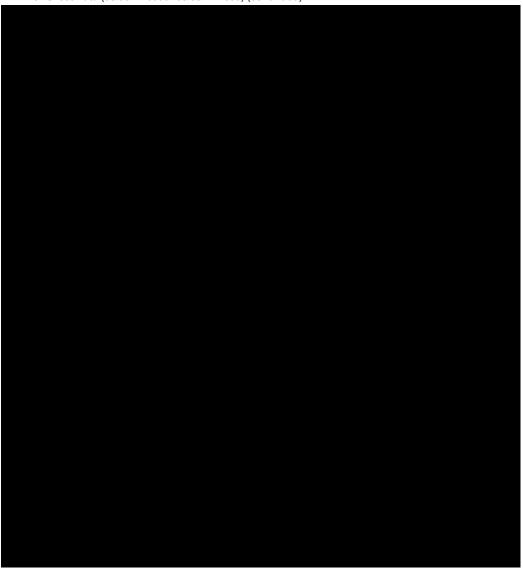
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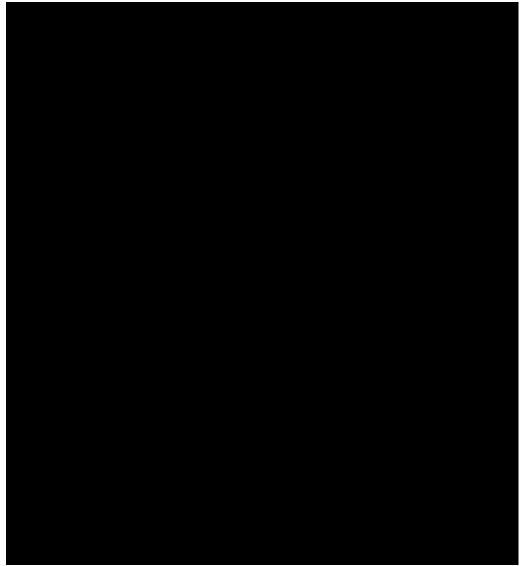
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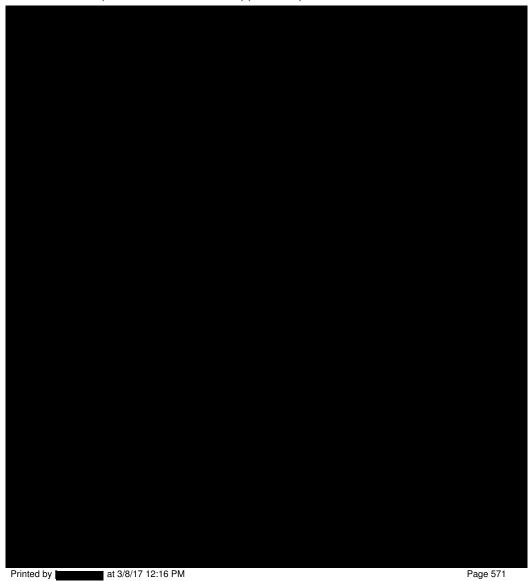
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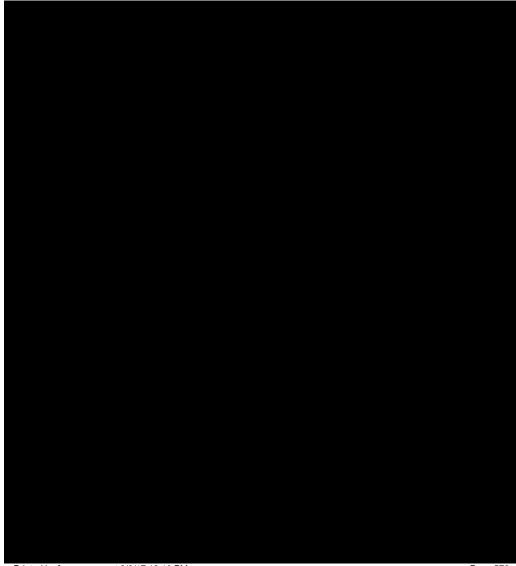
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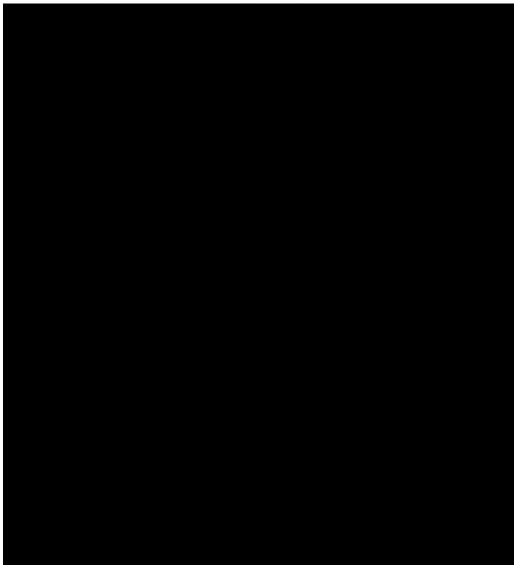
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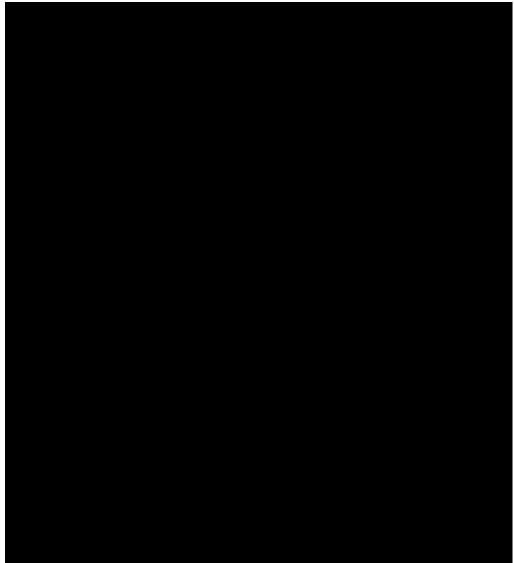
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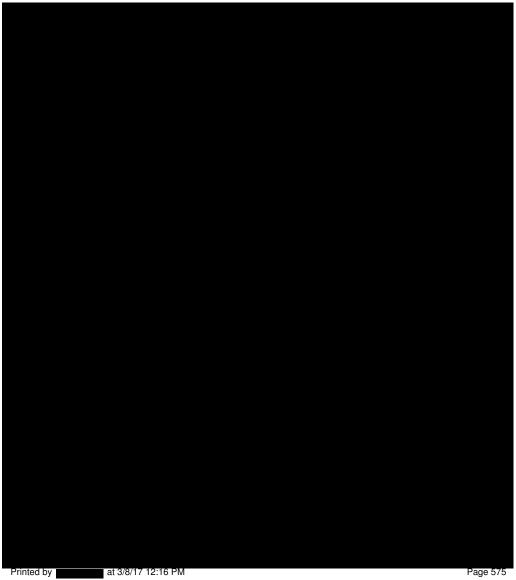
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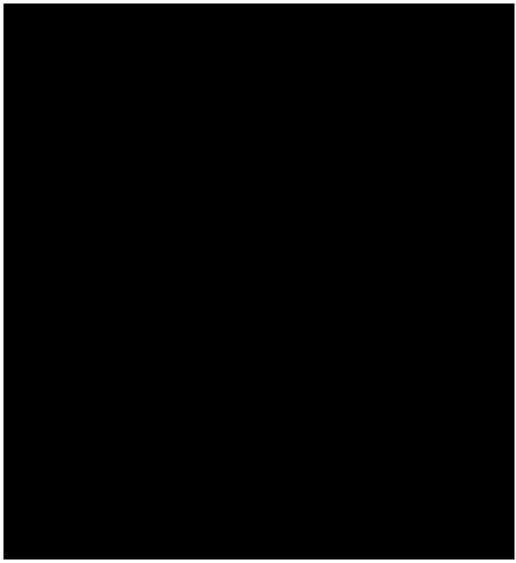
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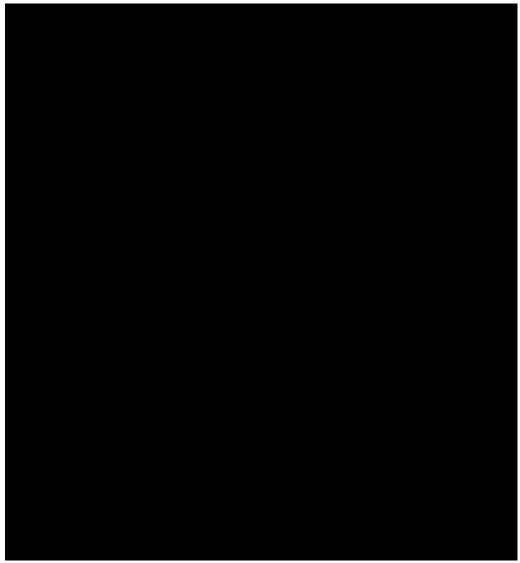
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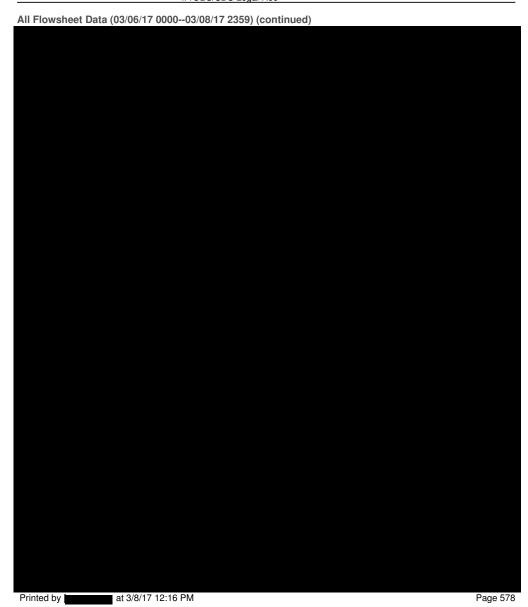
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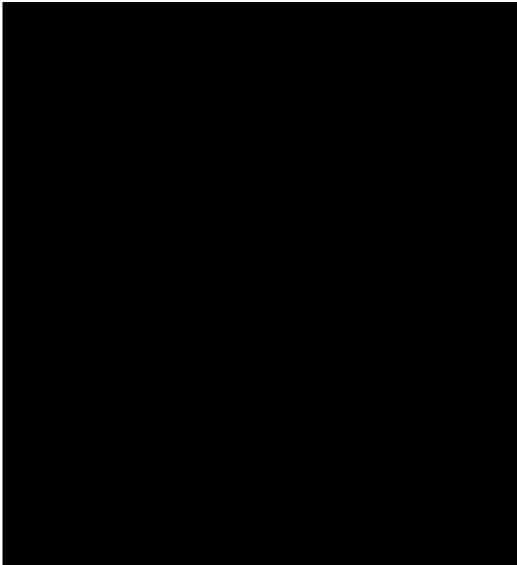
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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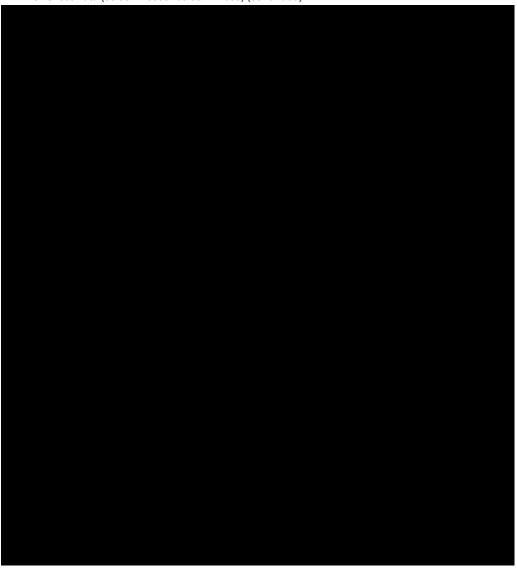
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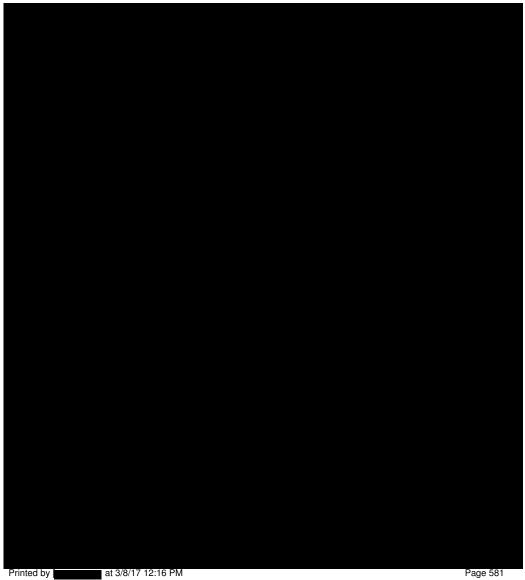
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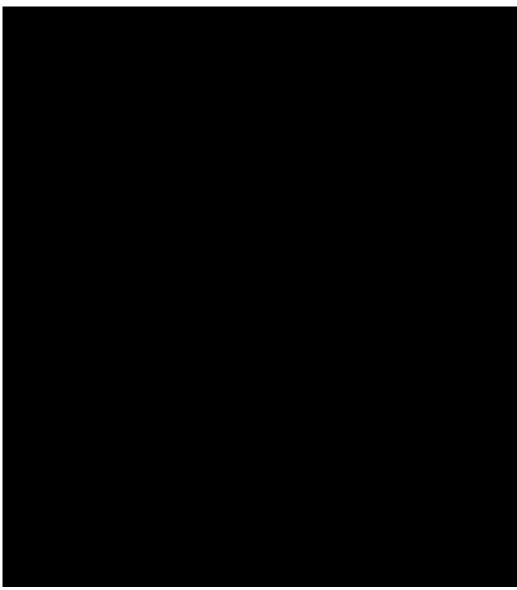
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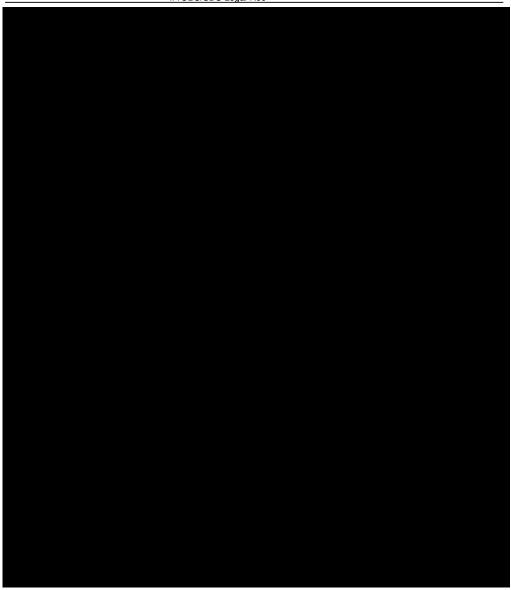
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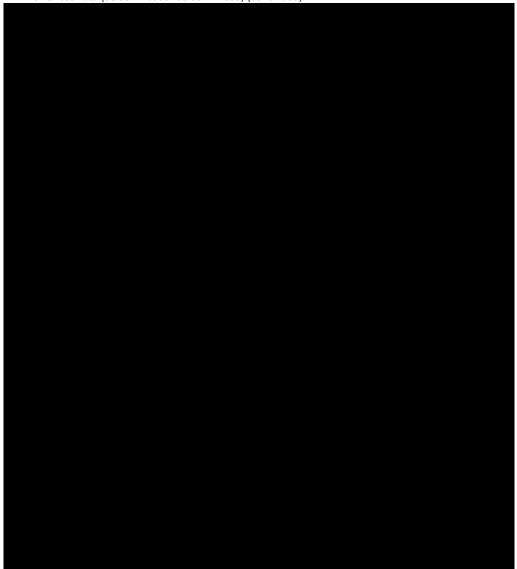
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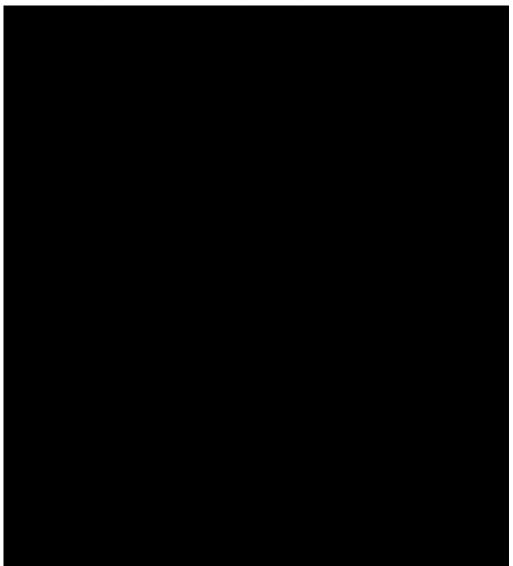
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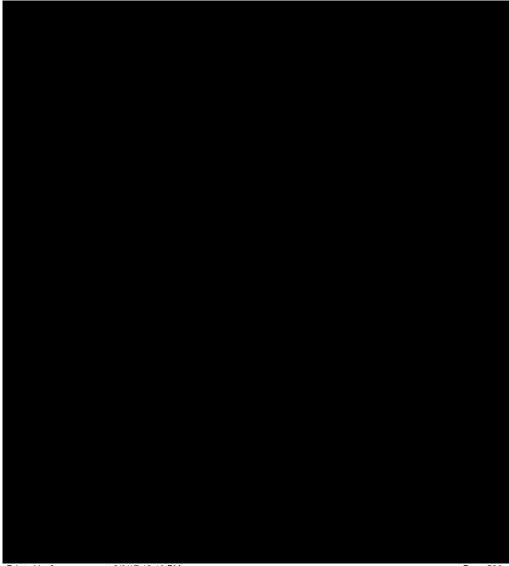
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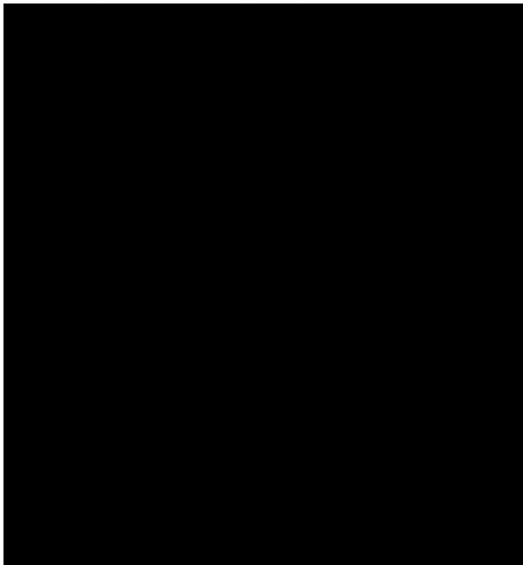
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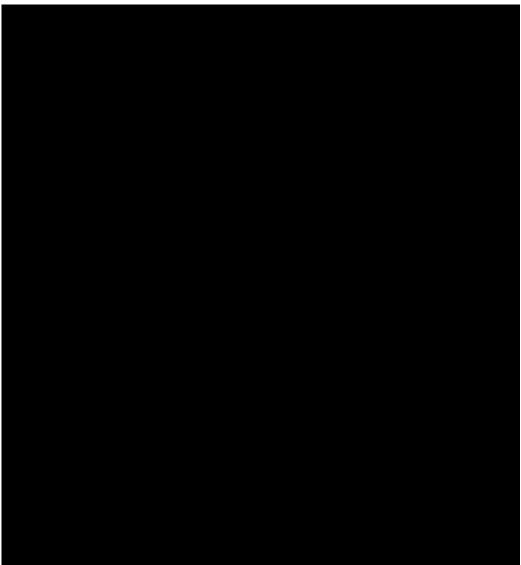
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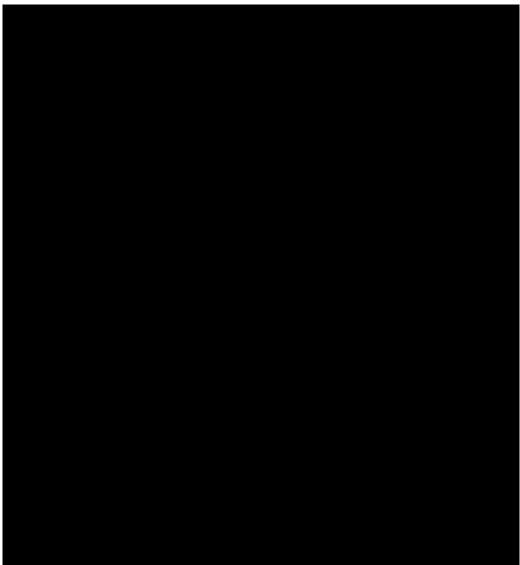
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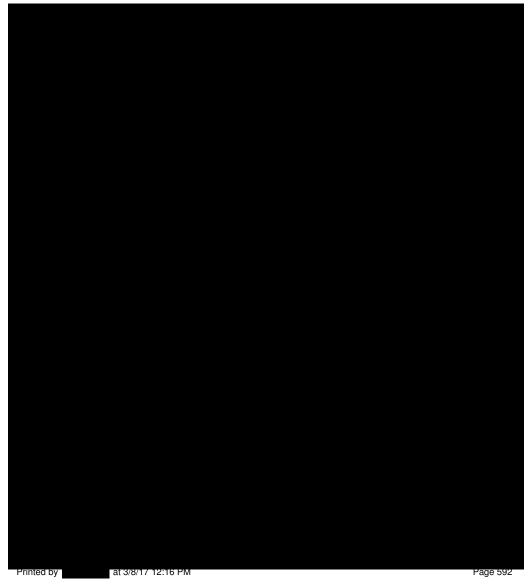
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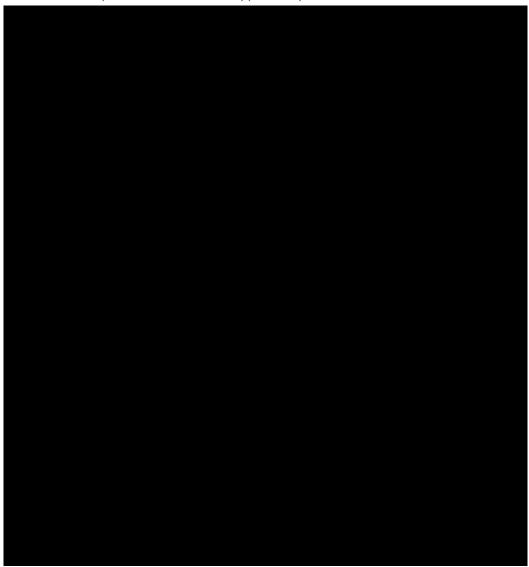
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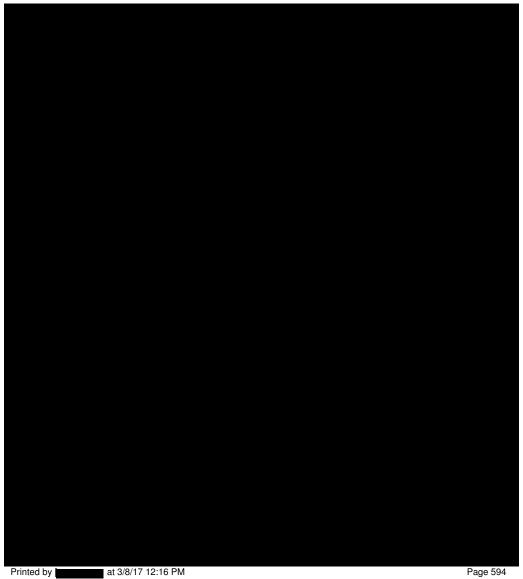
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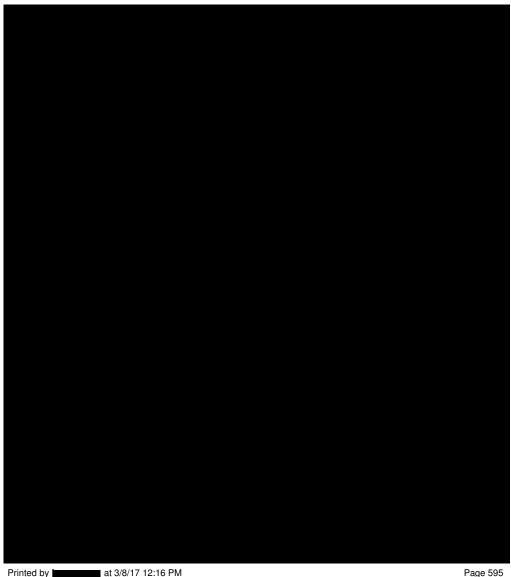
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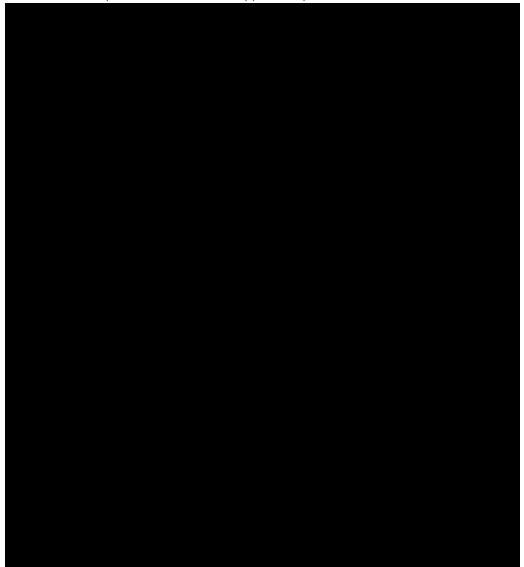
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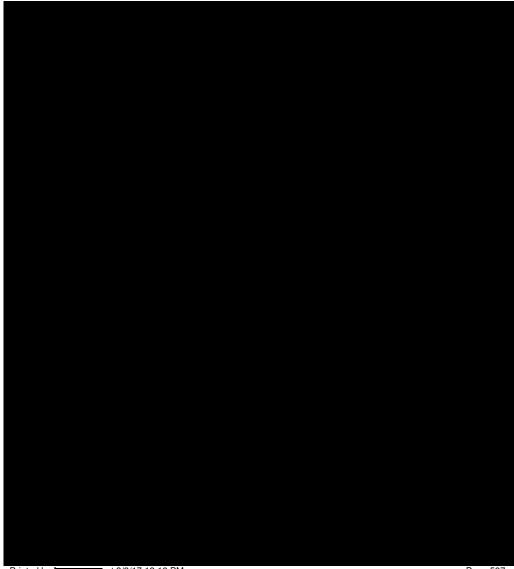
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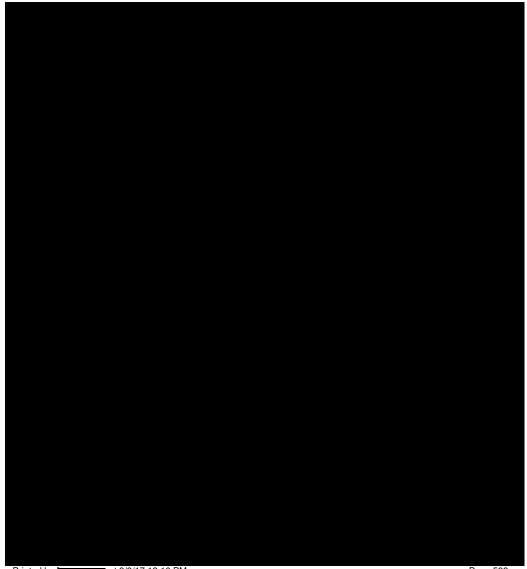
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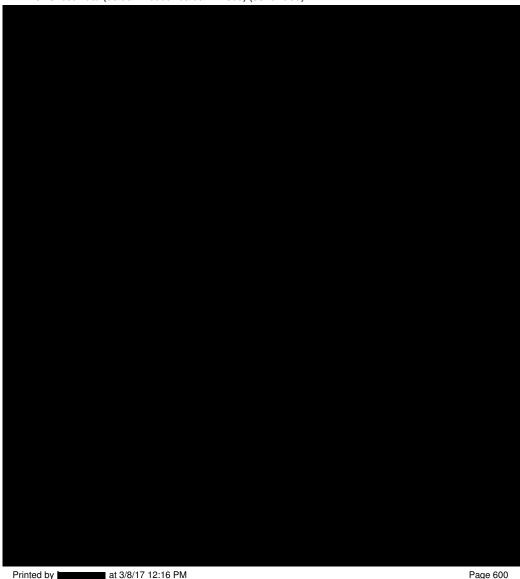
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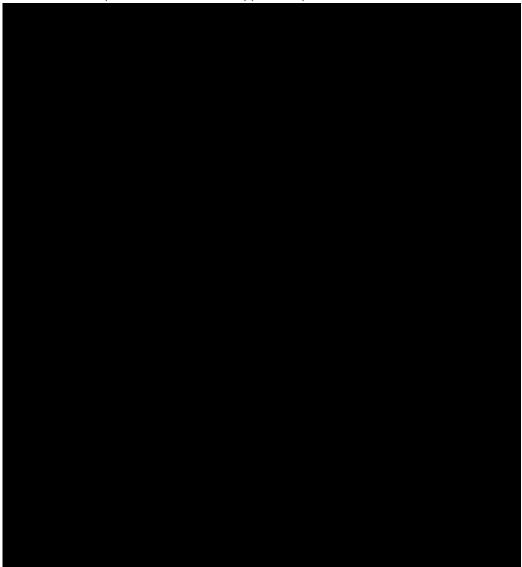
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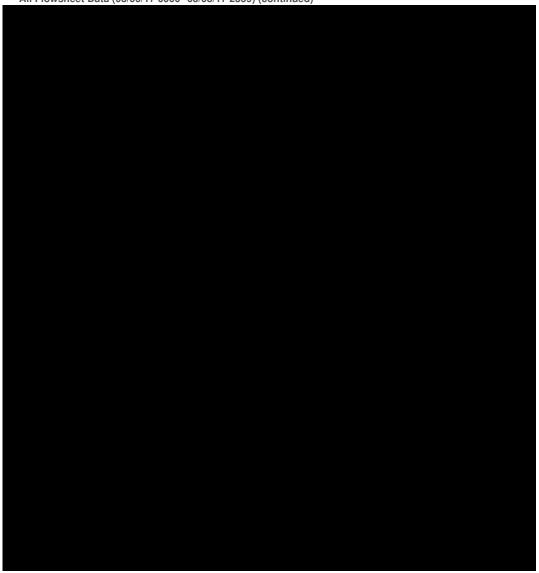
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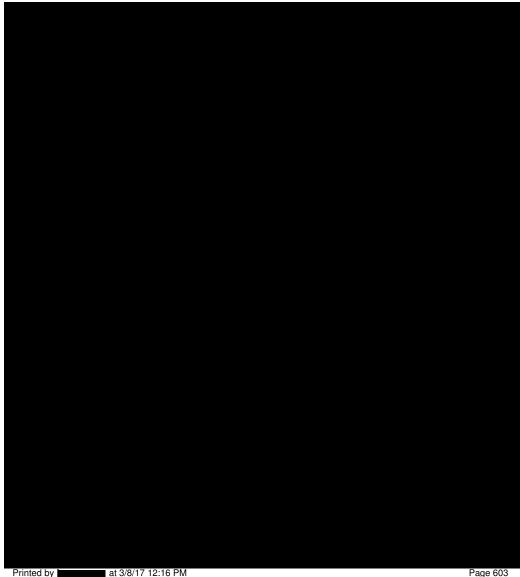
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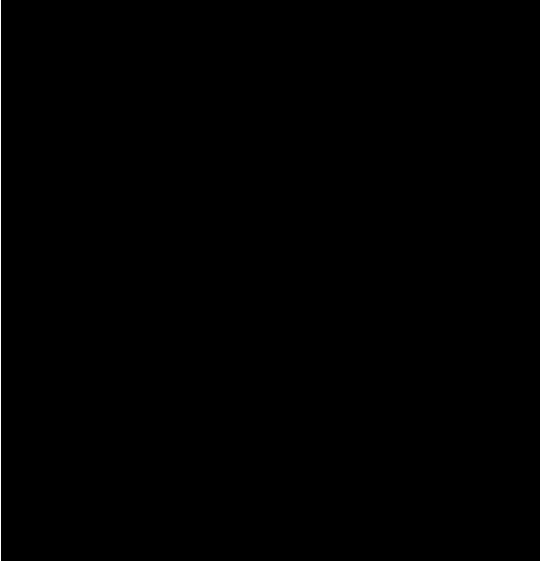
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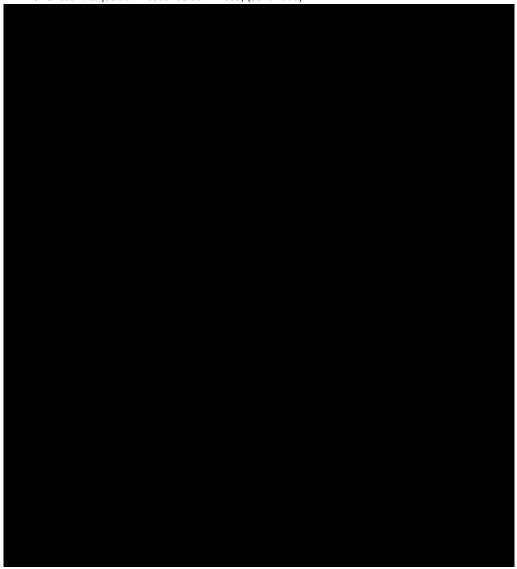
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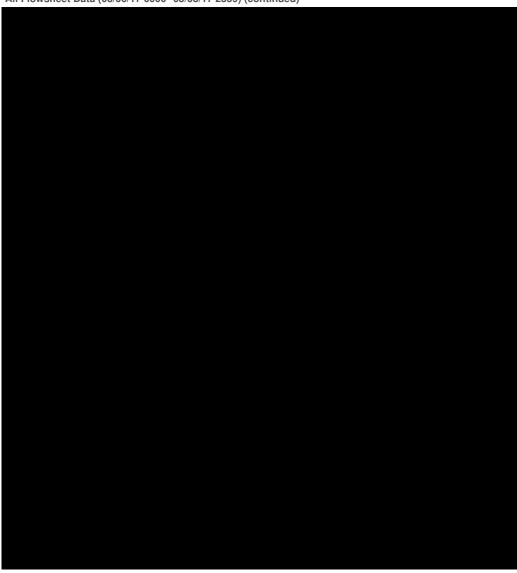
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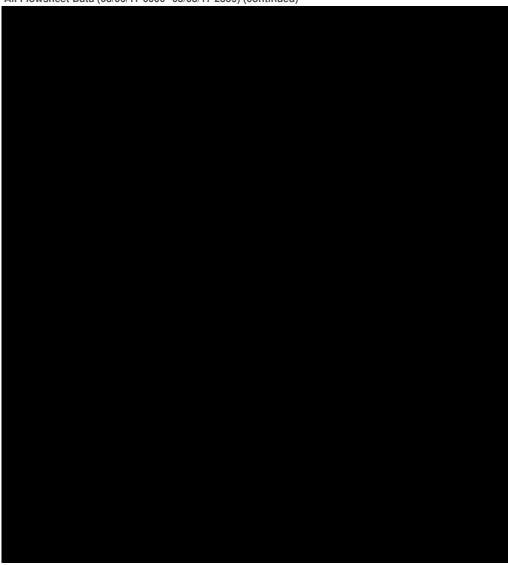
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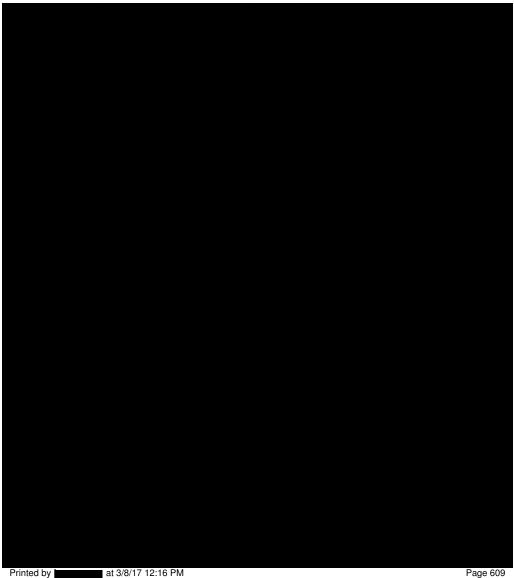
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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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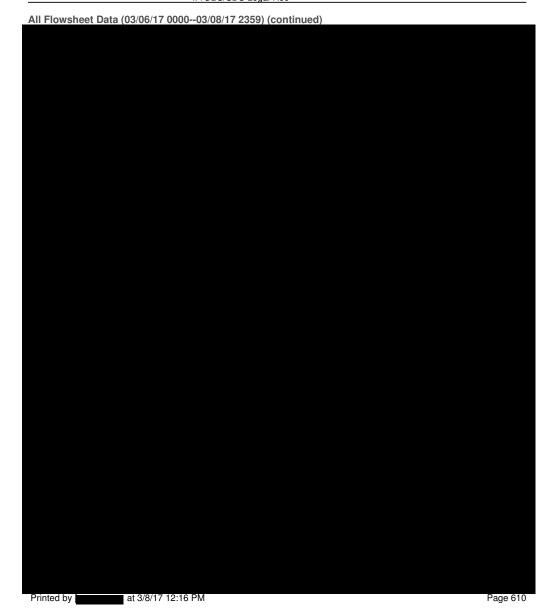
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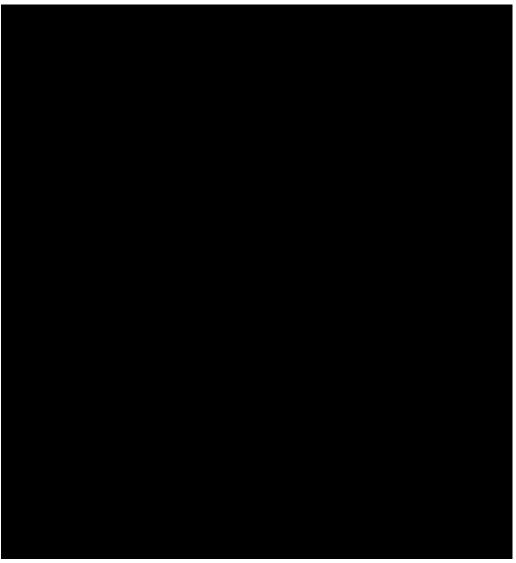
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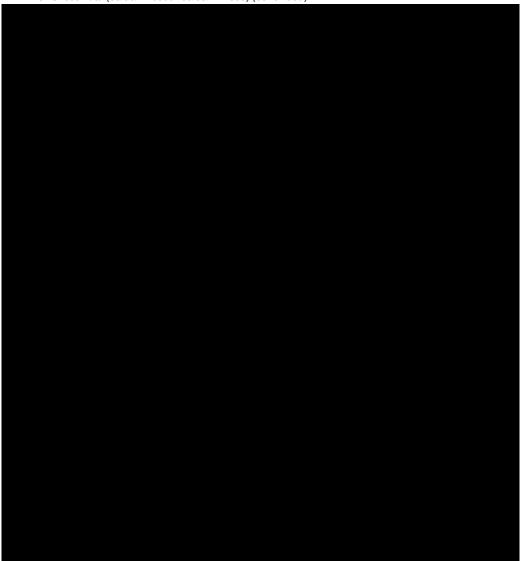
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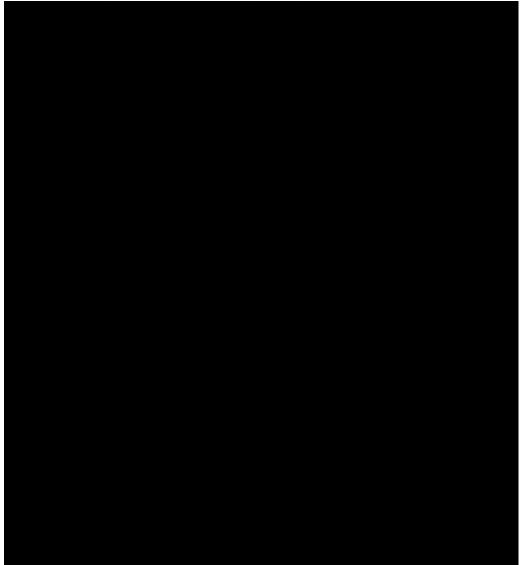
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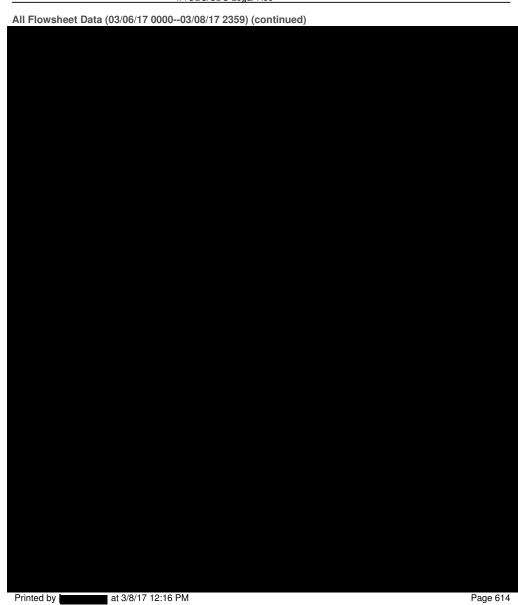
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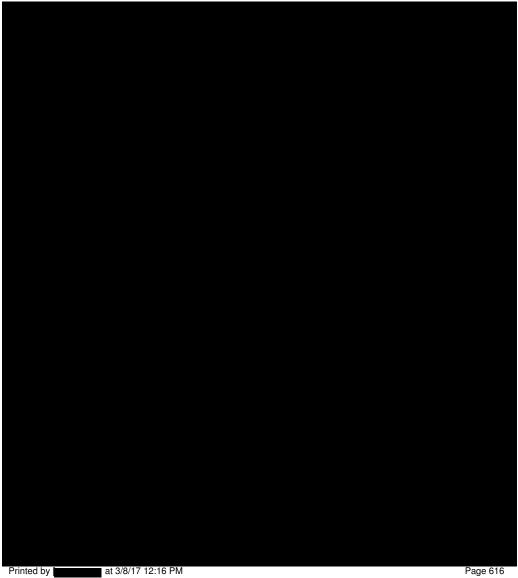
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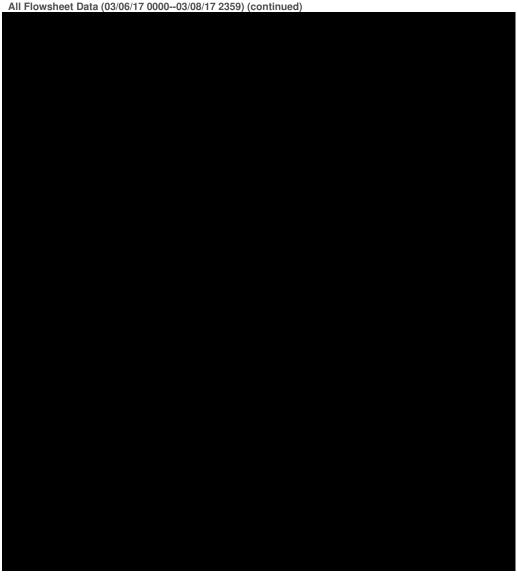
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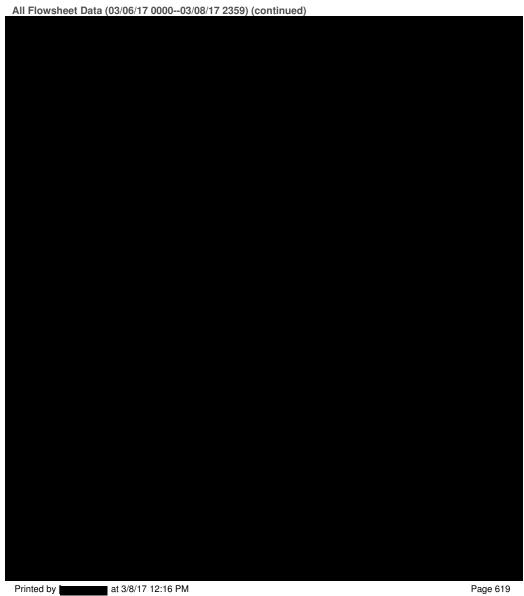
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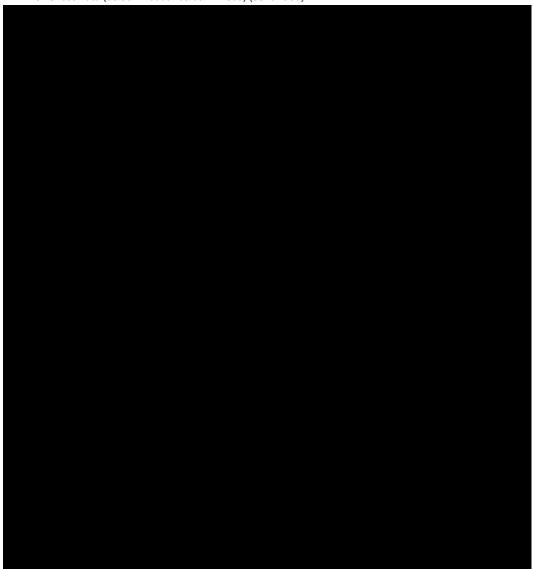
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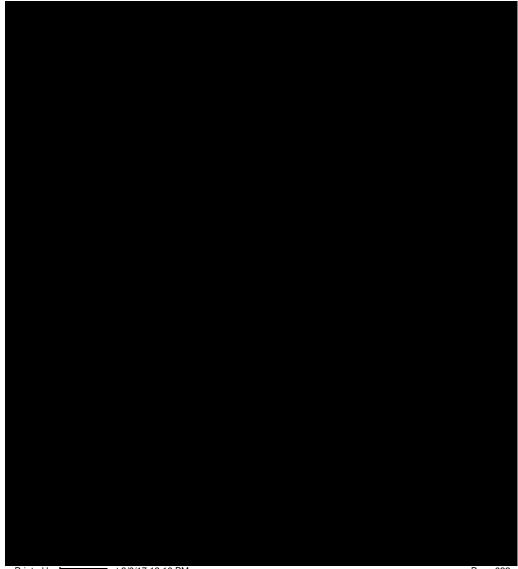
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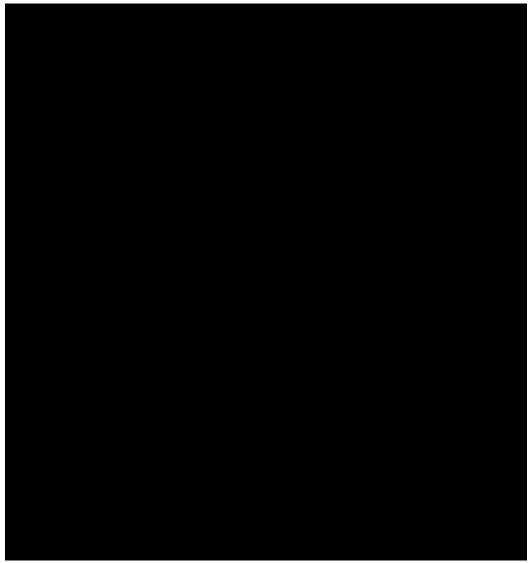
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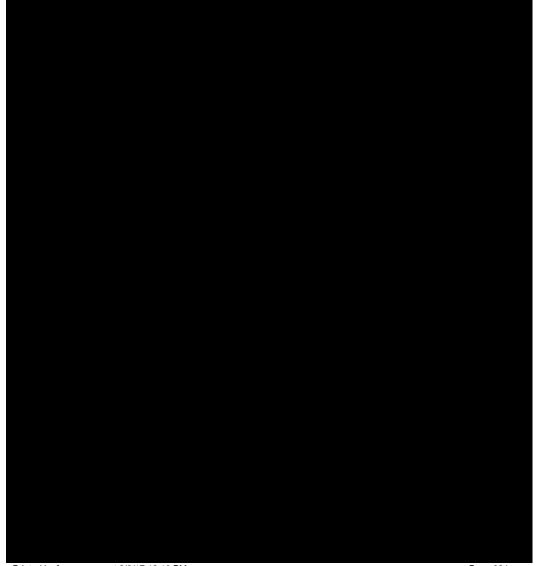
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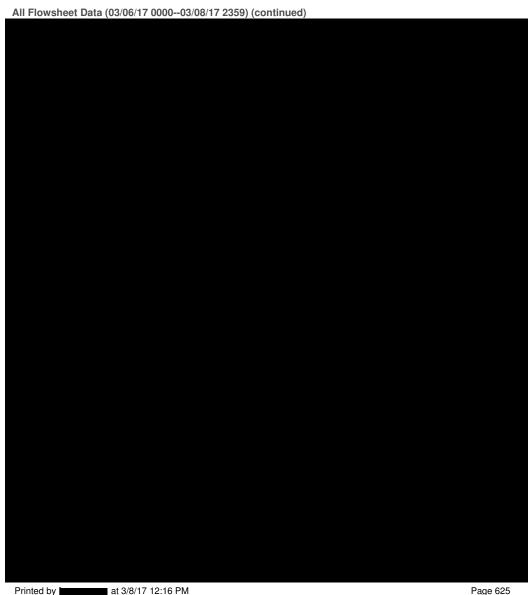
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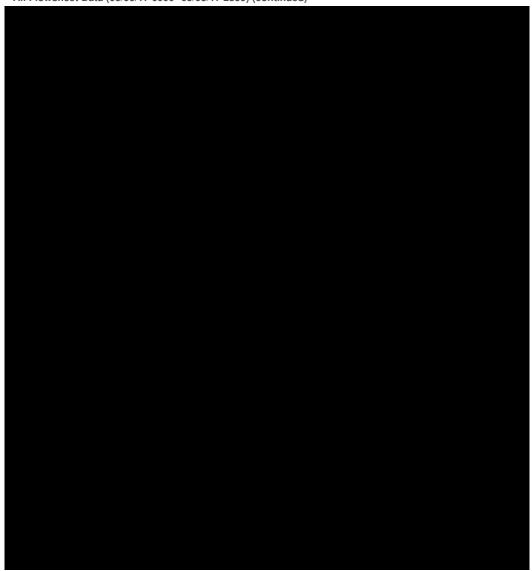
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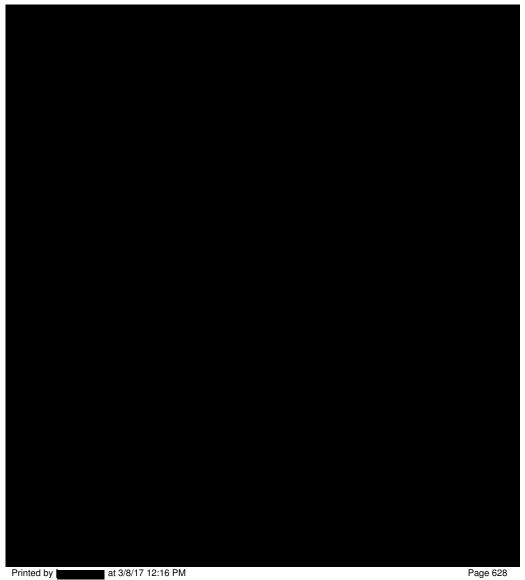
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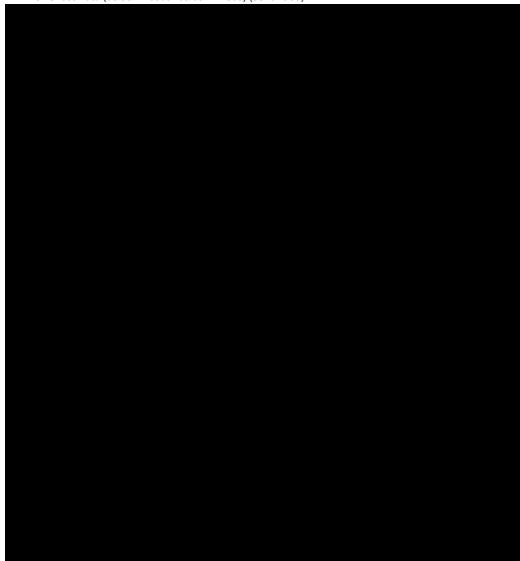
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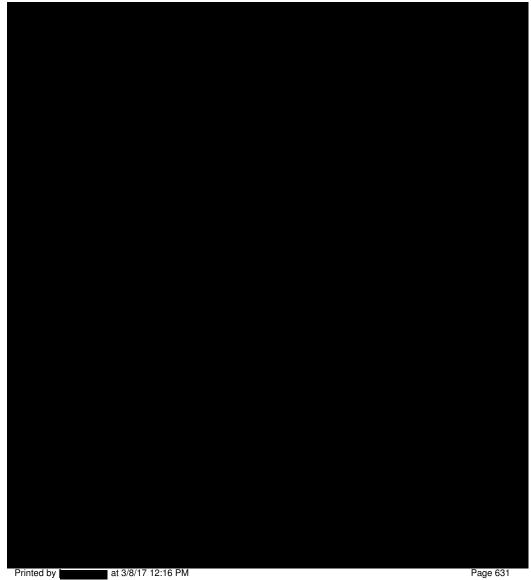
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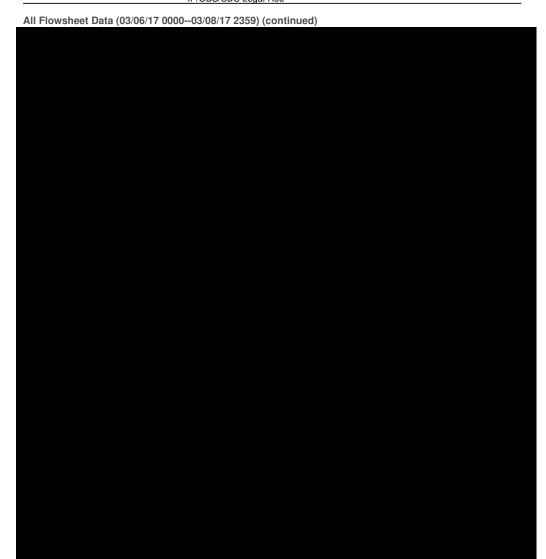
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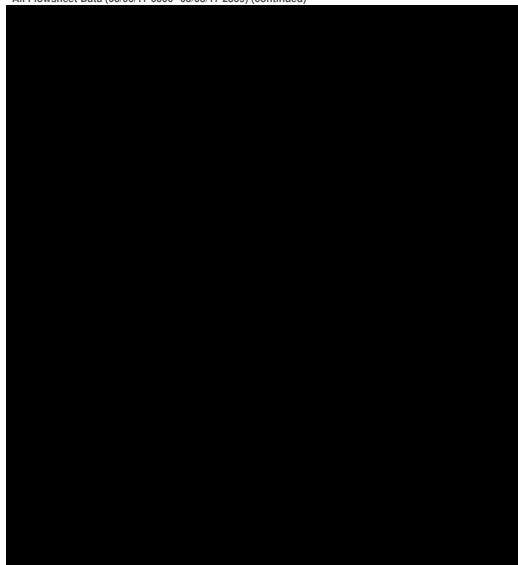
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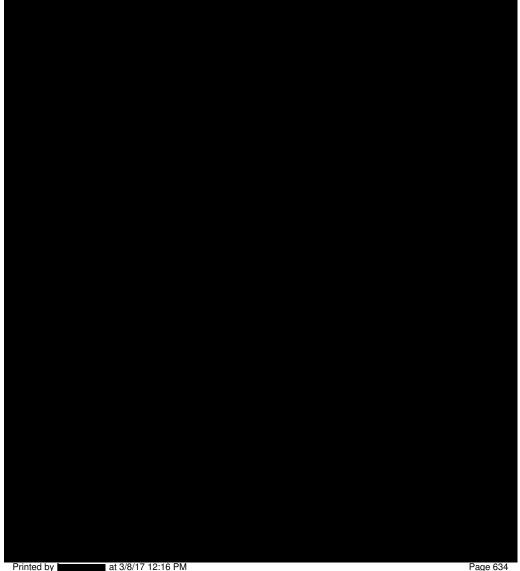
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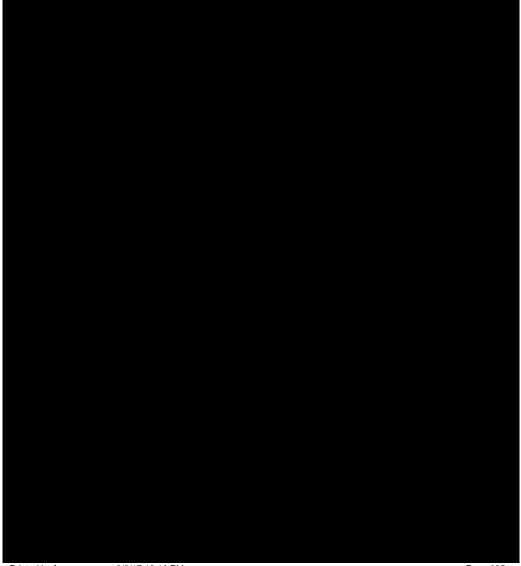
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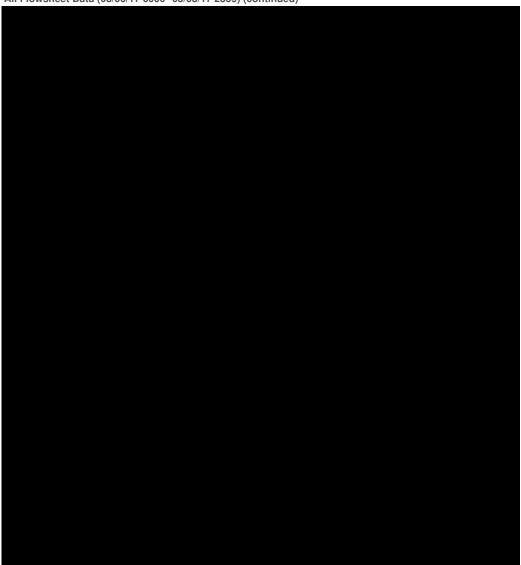
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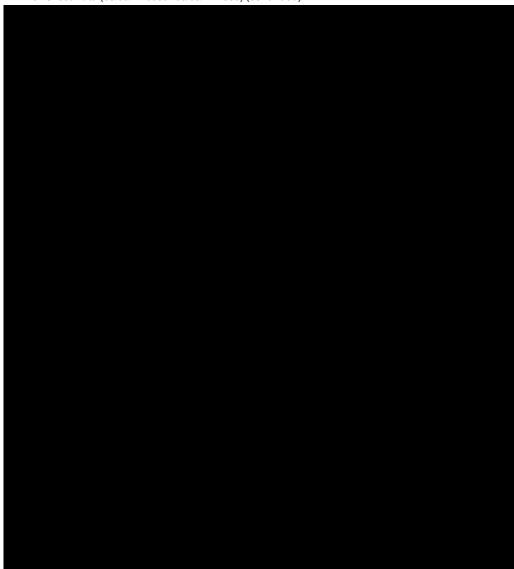
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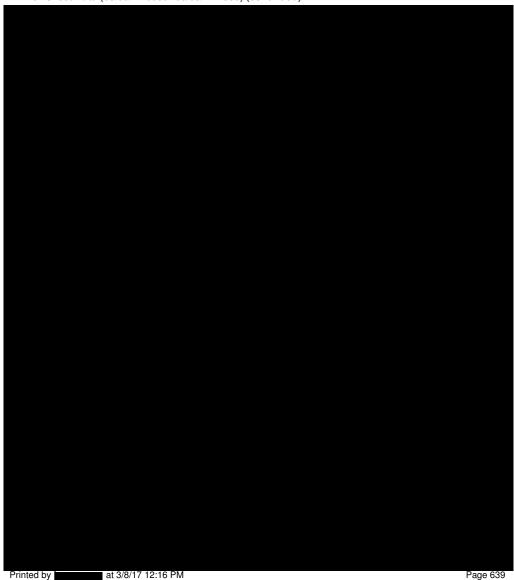
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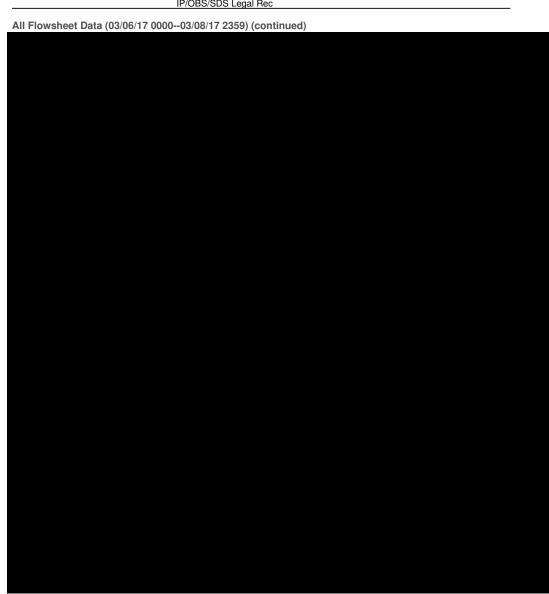
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GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

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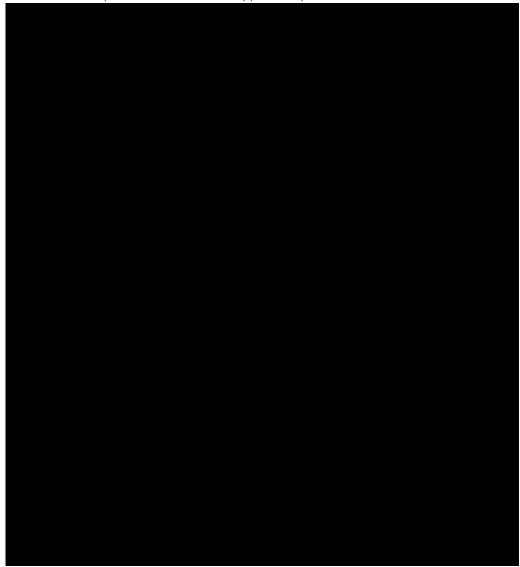
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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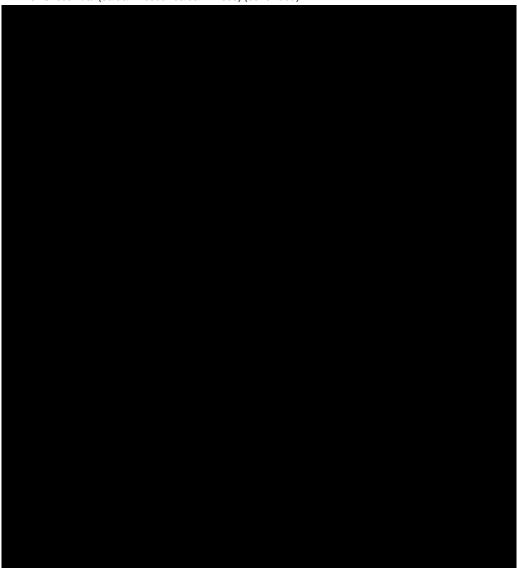
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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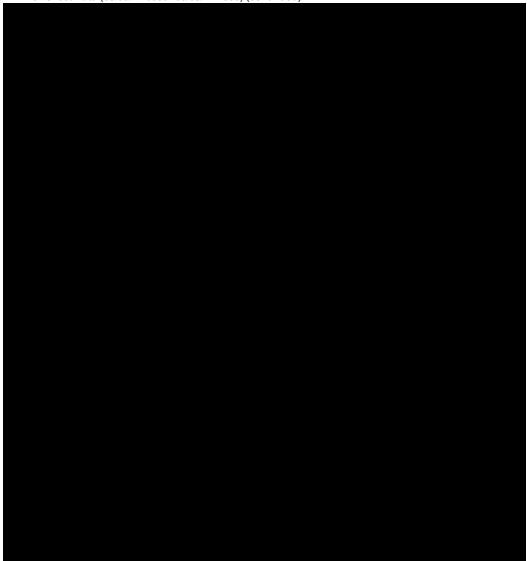
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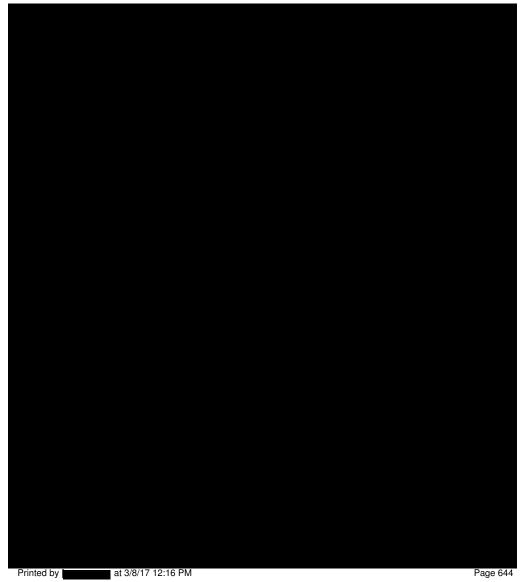
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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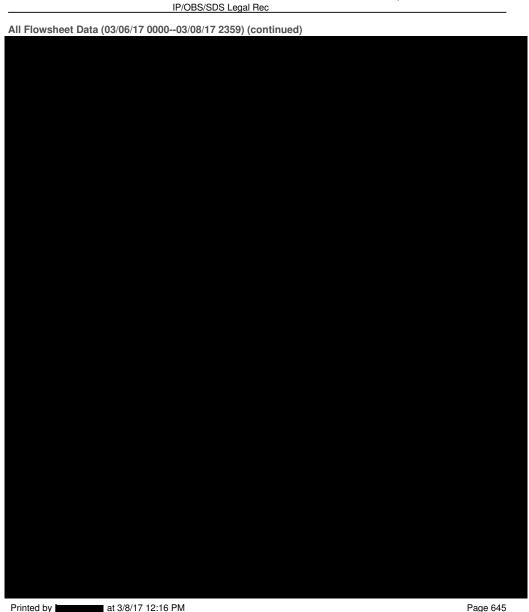
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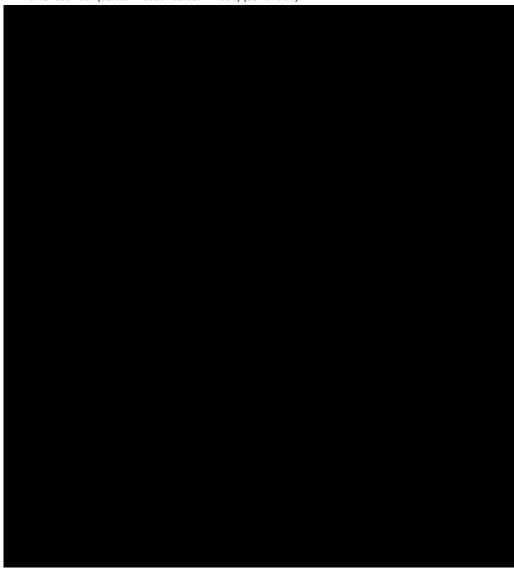
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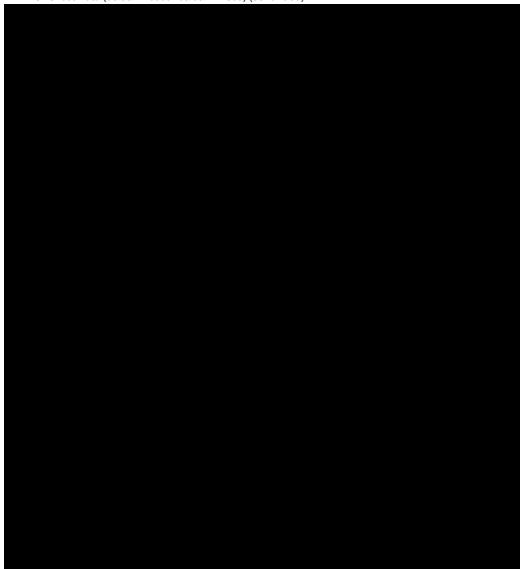
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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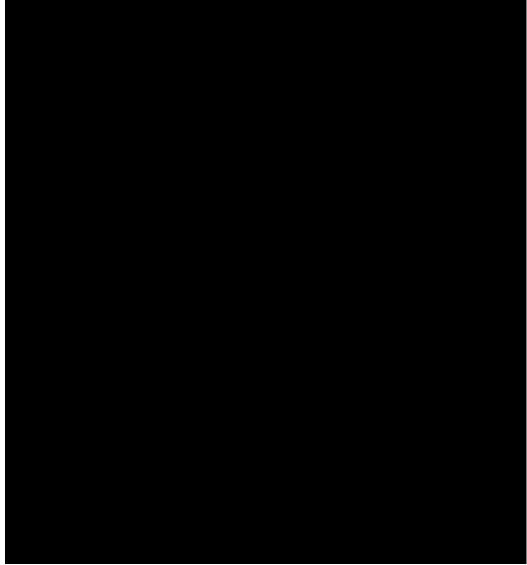
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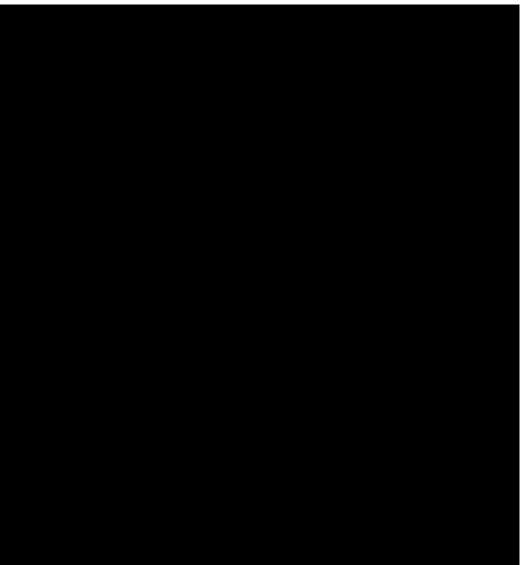
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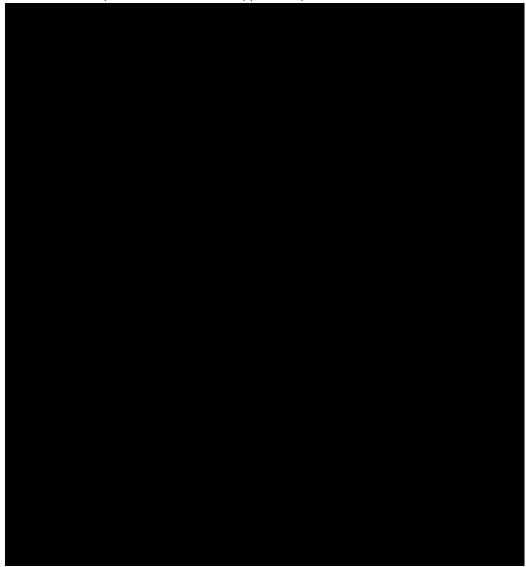
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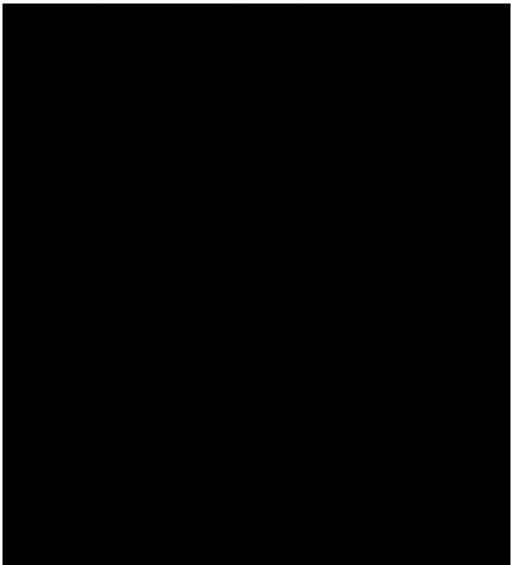
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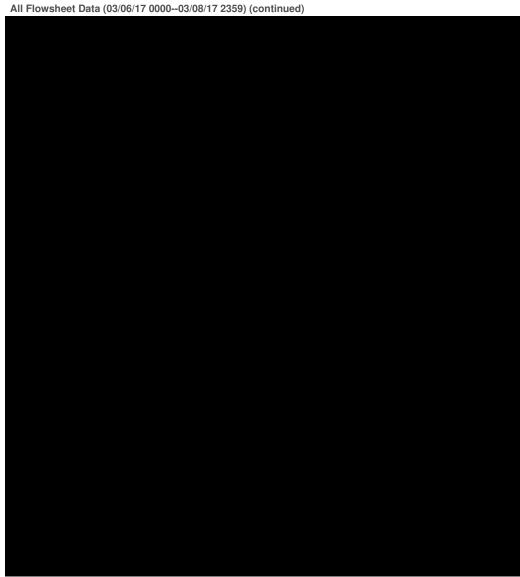
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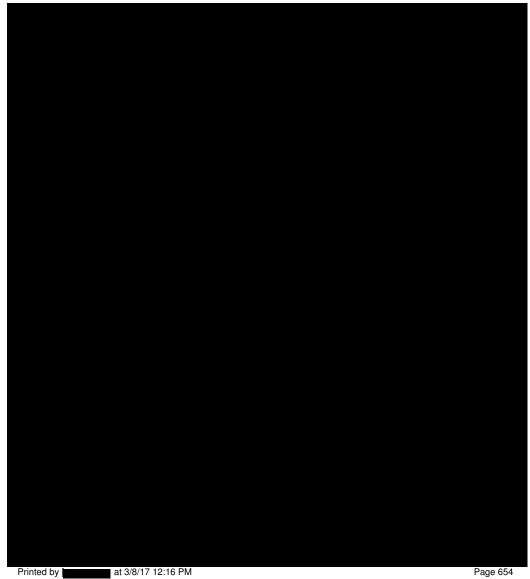
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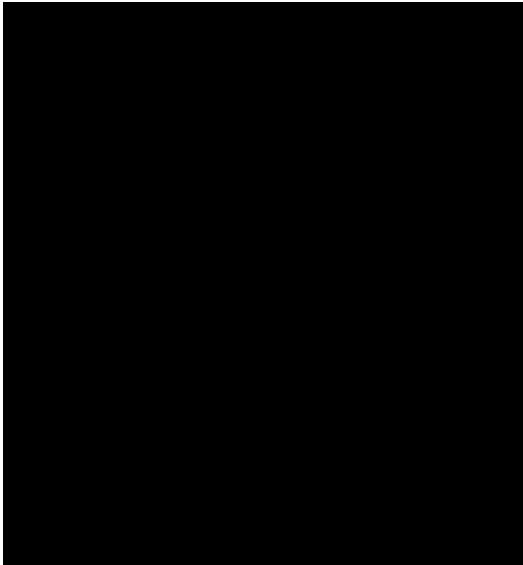
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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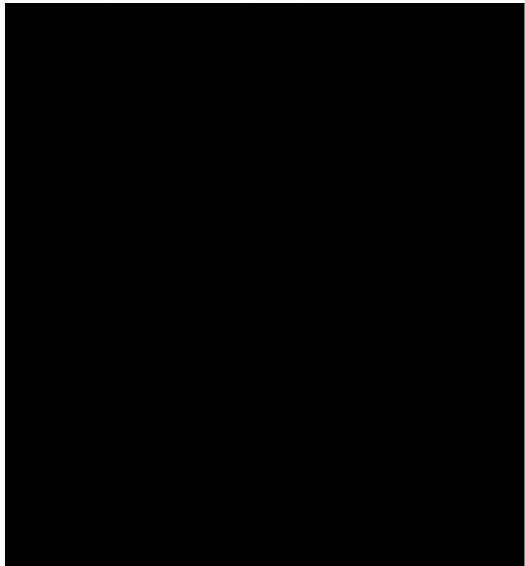
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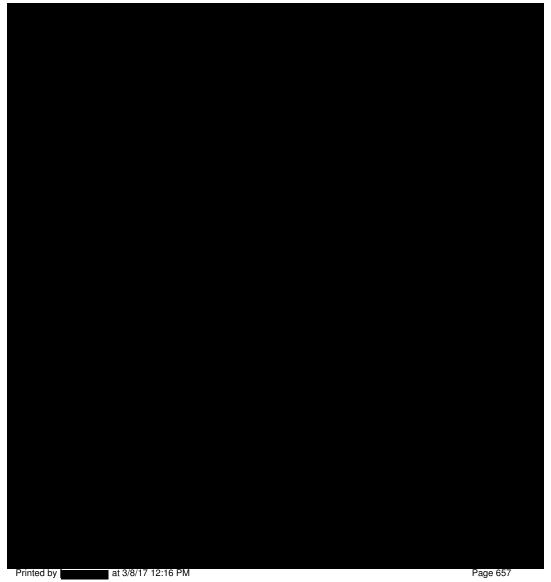
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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

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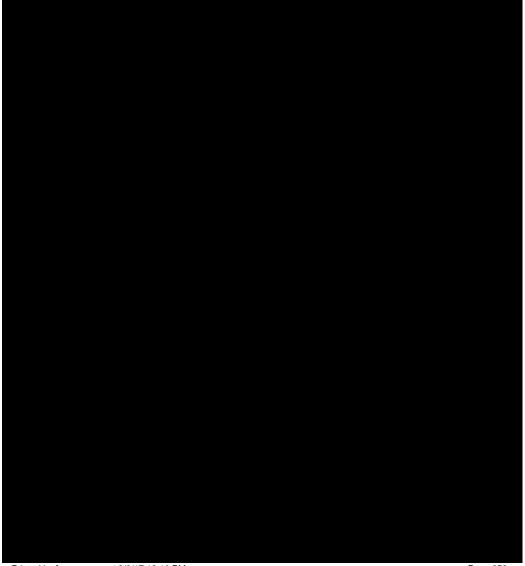
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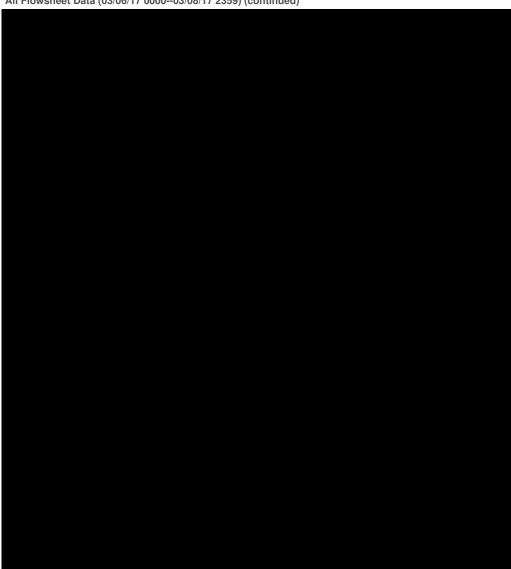
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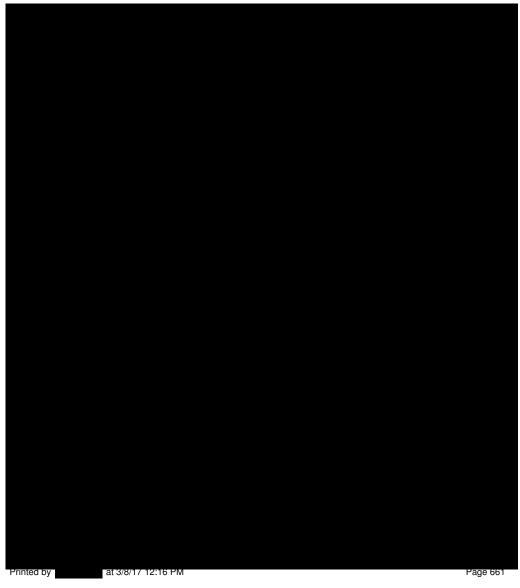
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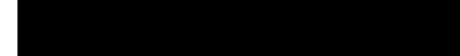
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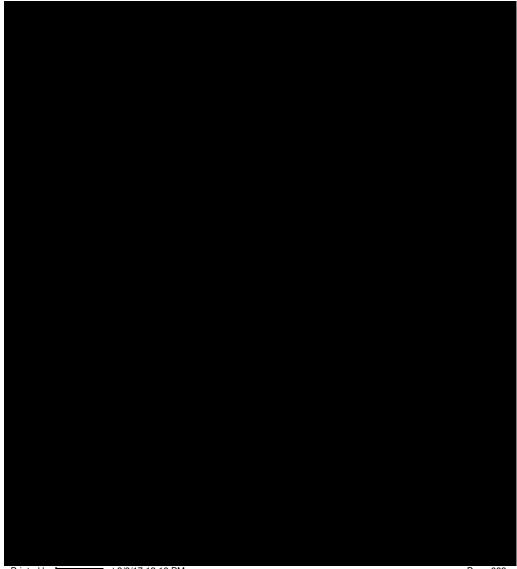
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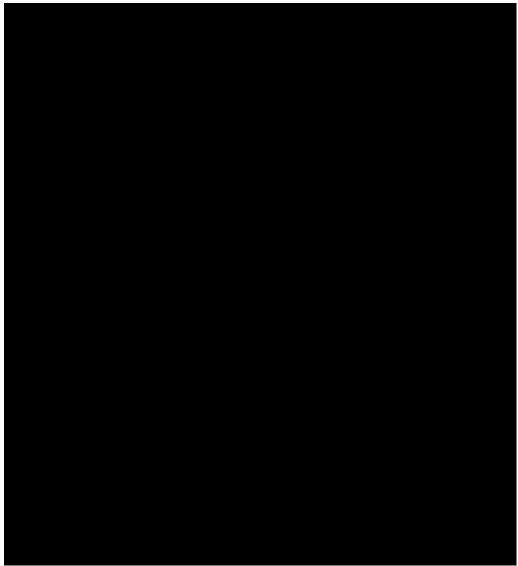
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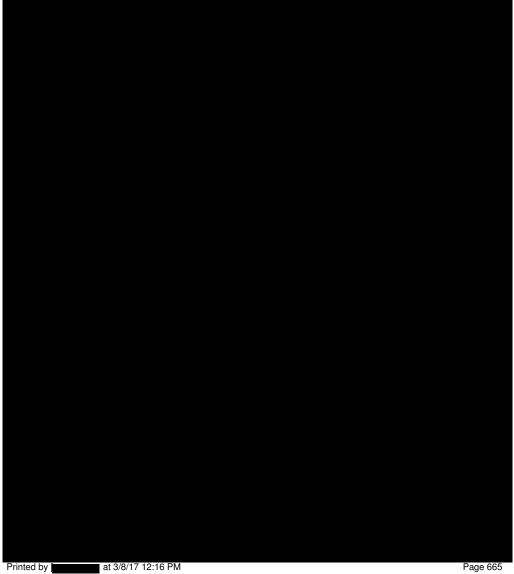
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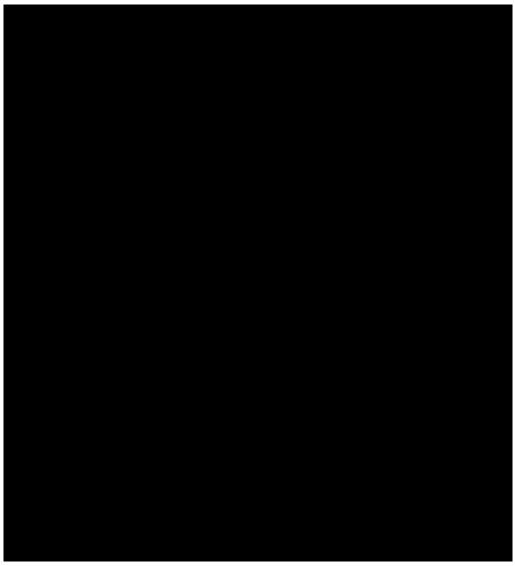
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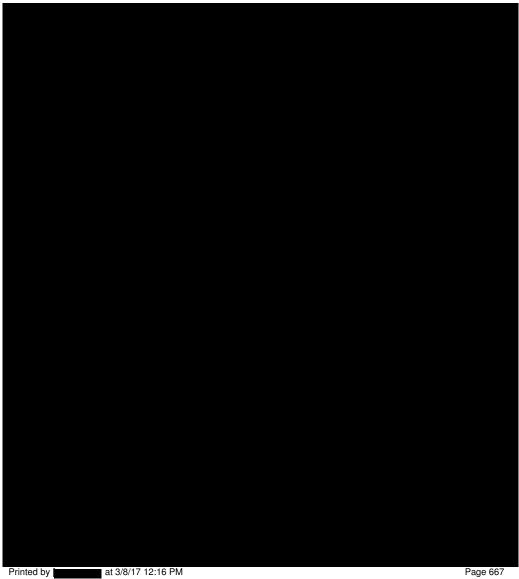
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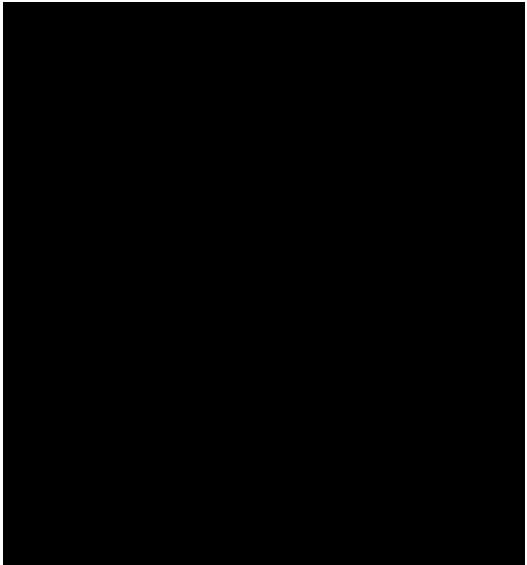
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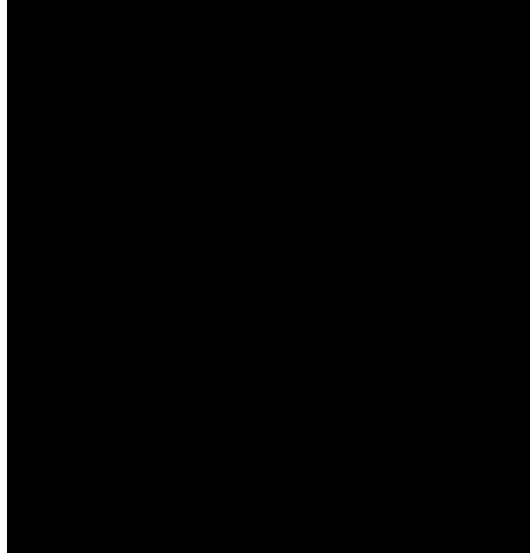
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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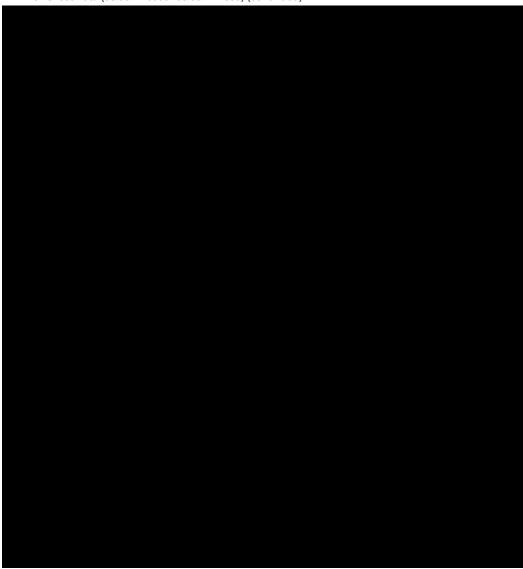
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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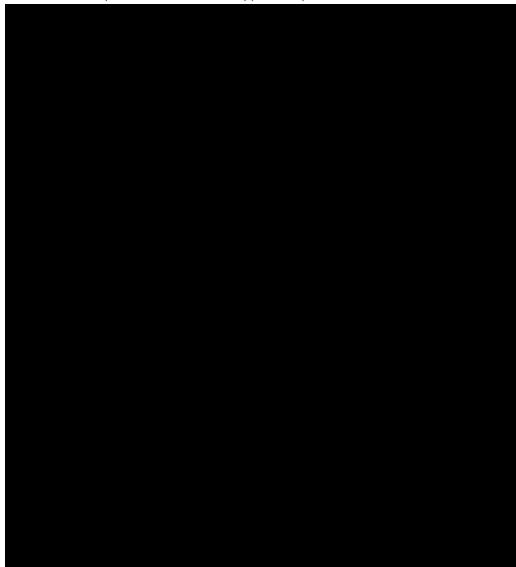
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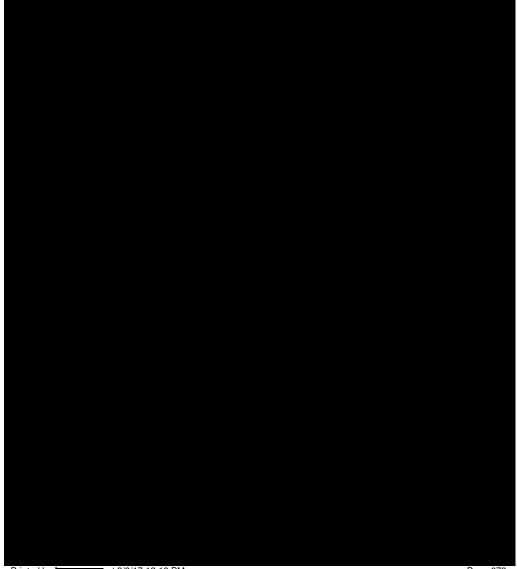
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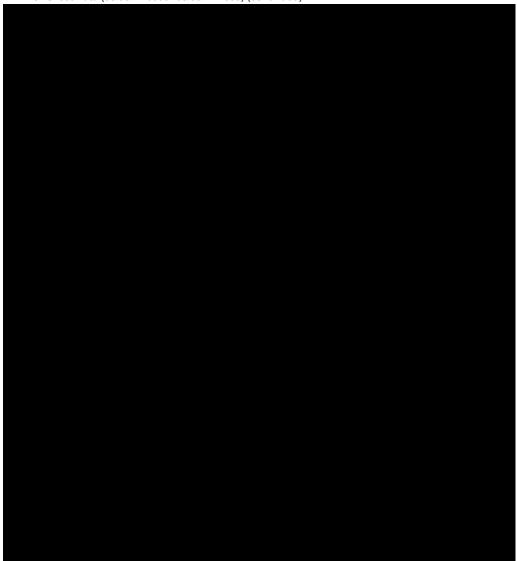
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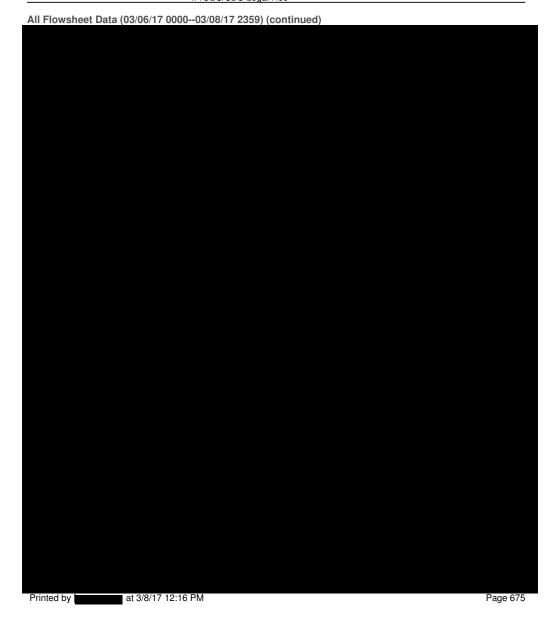
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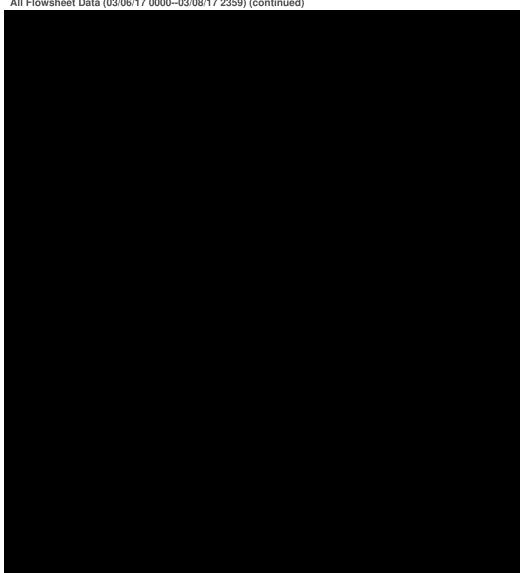
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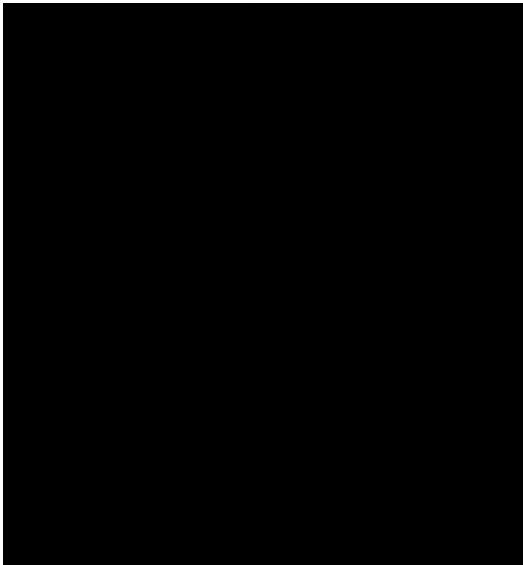
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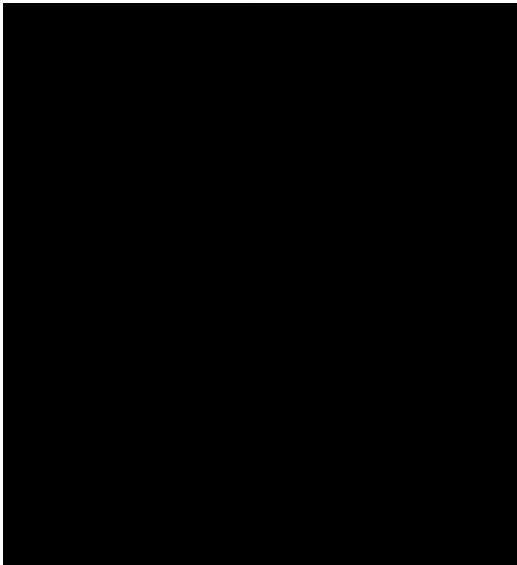
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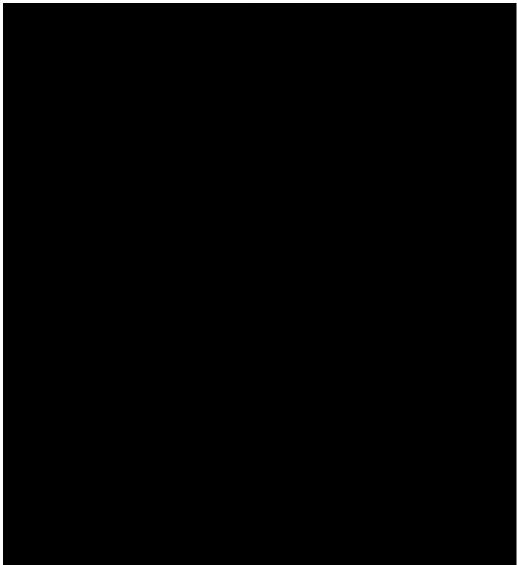
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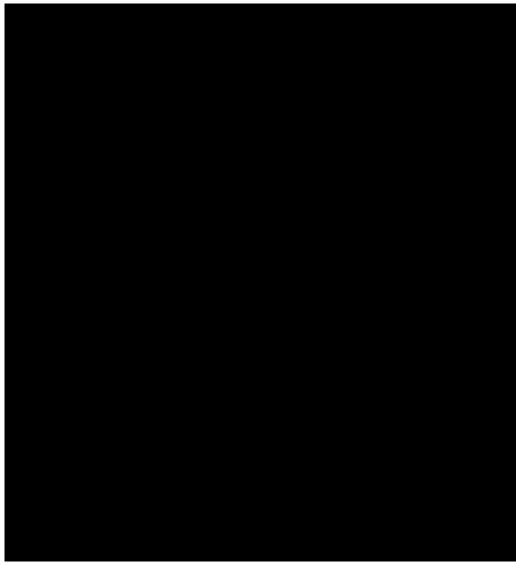
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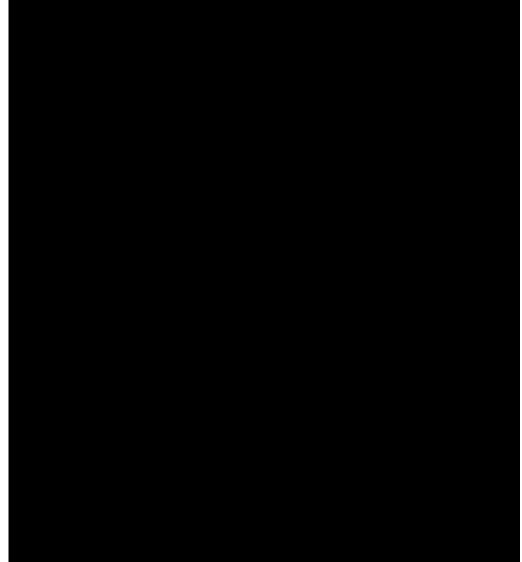
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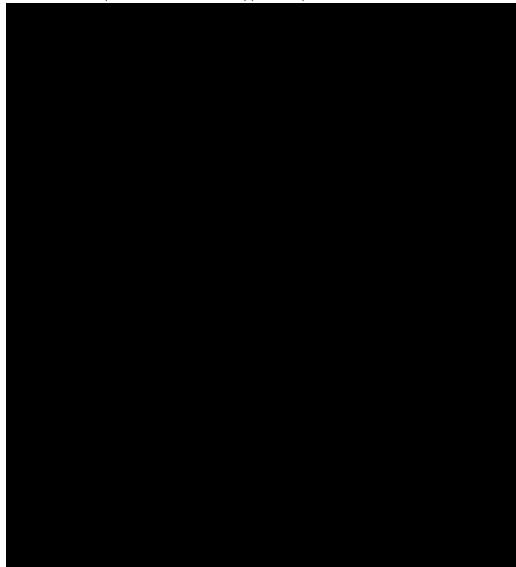
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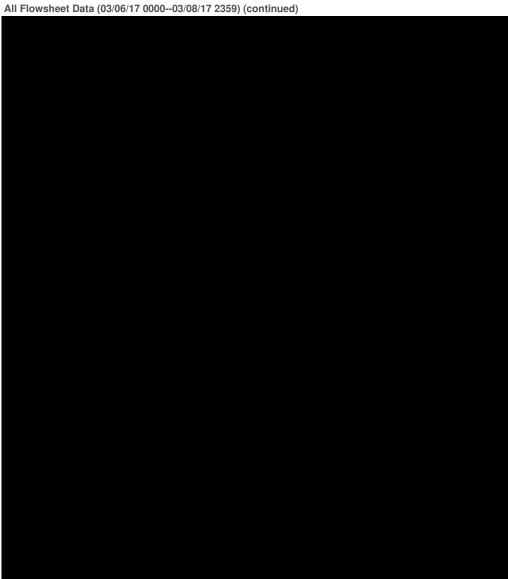
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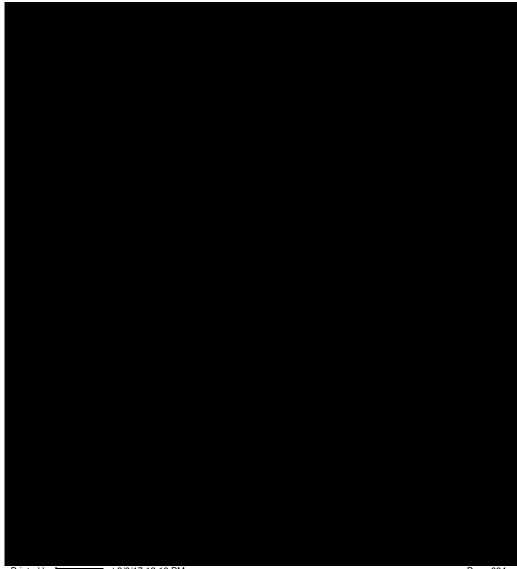
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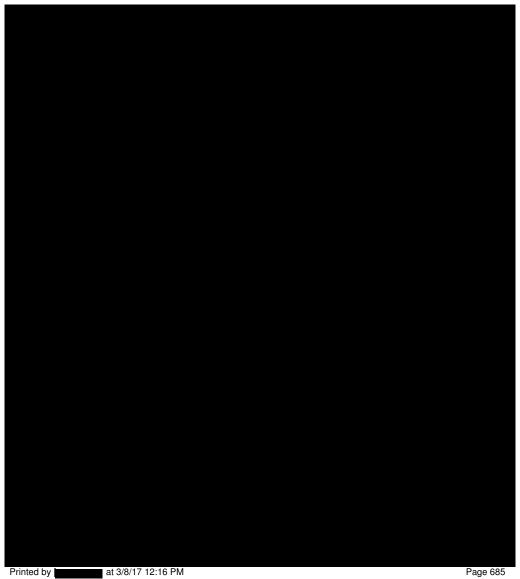
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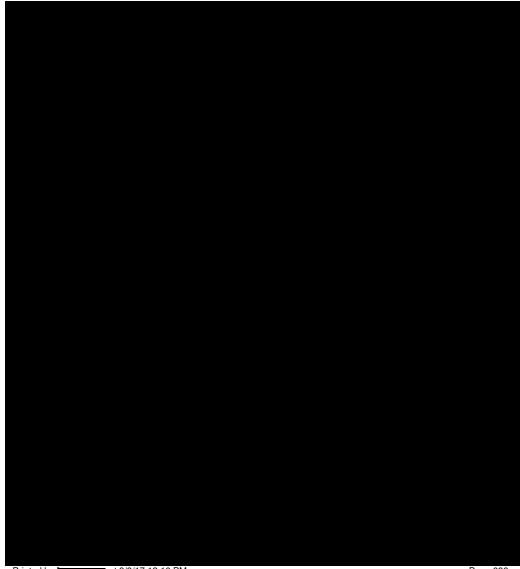
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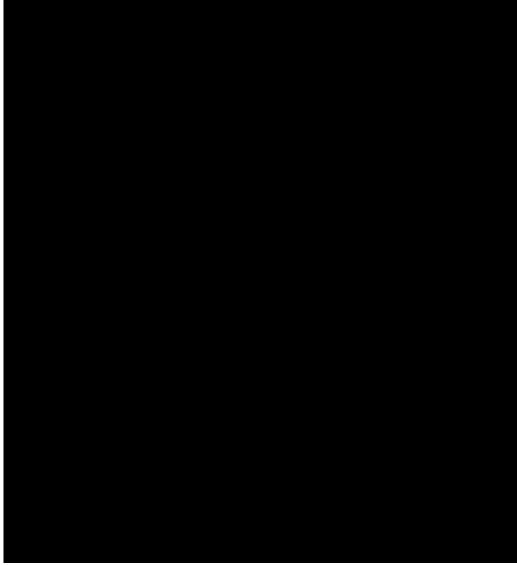
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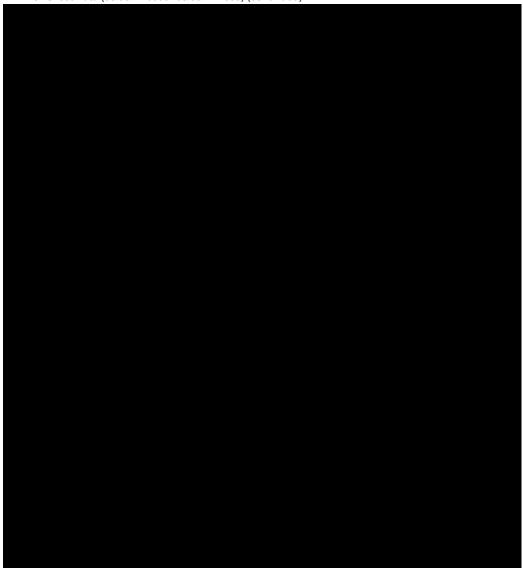
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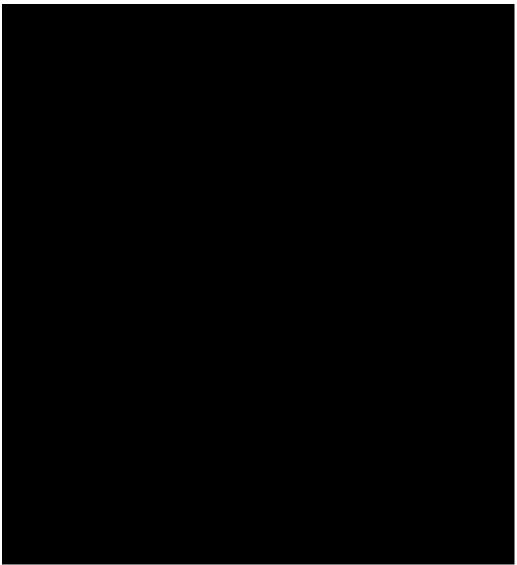
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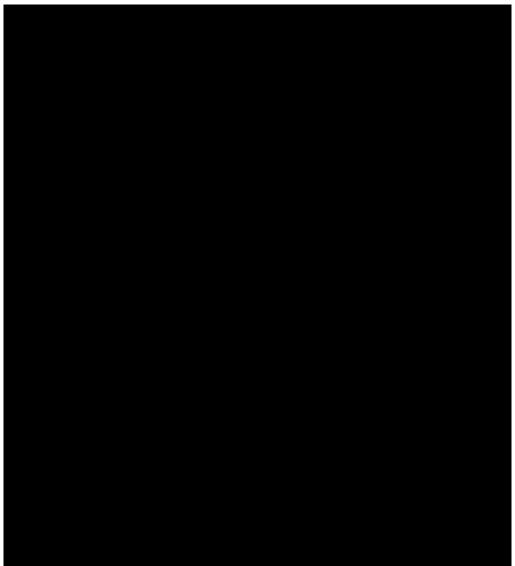
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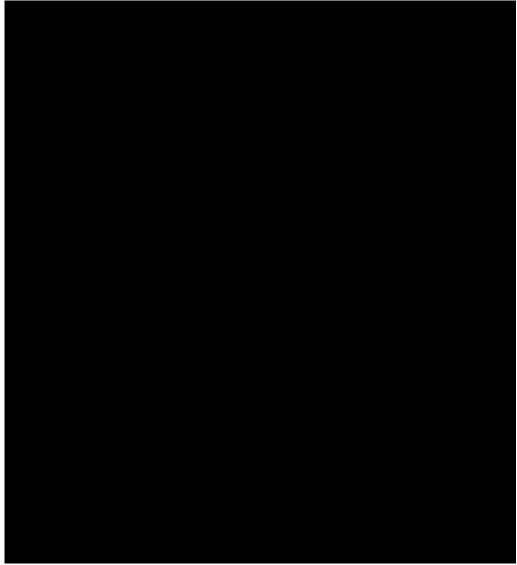
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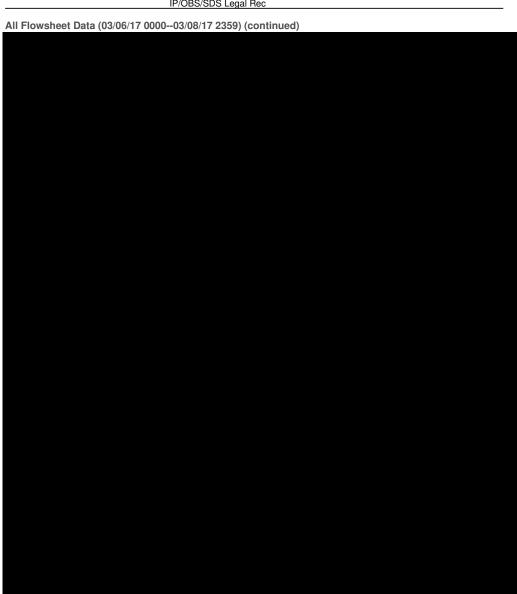
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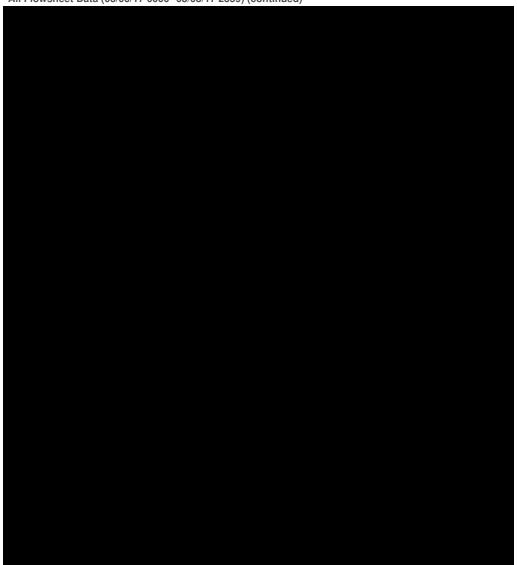
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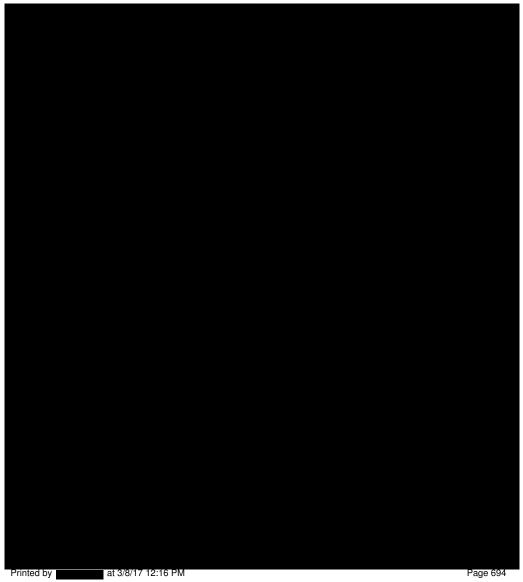
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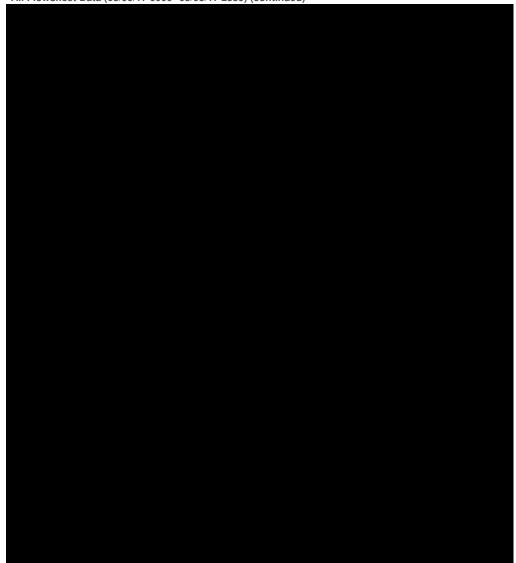
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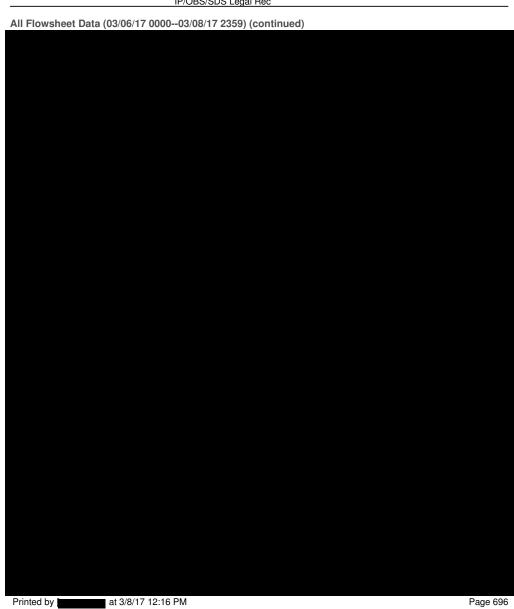
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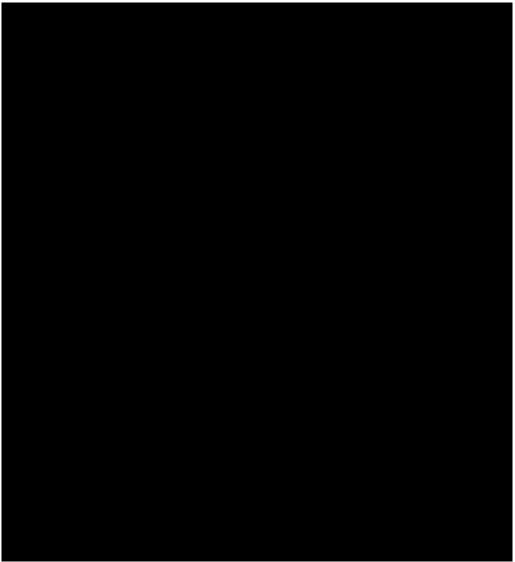
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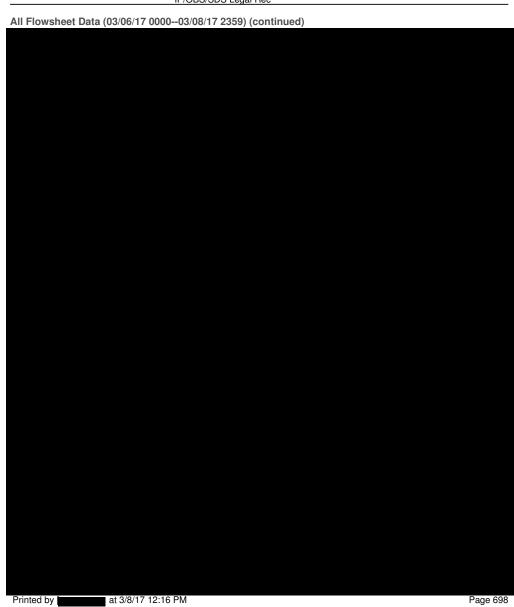
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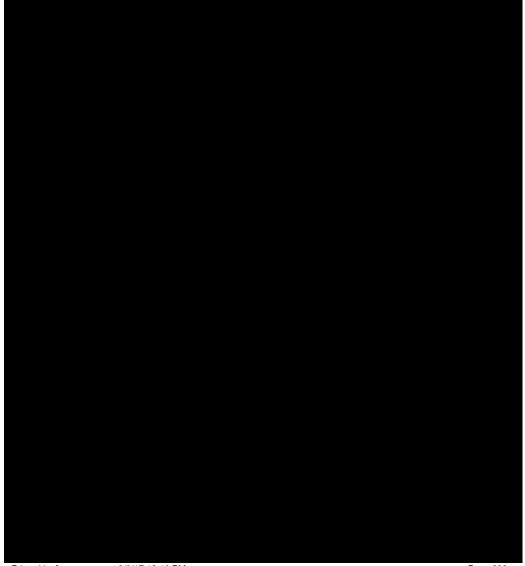
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

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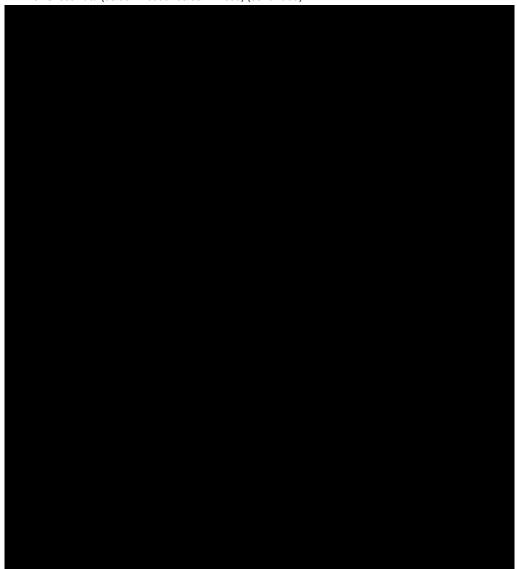
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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

Adm: 3/6/2017, D/C:

All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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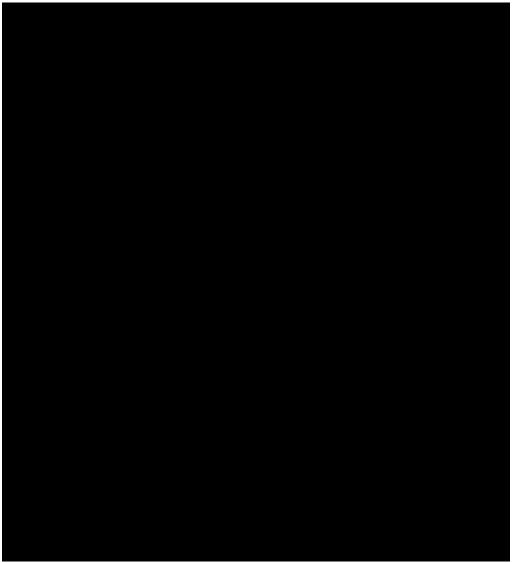
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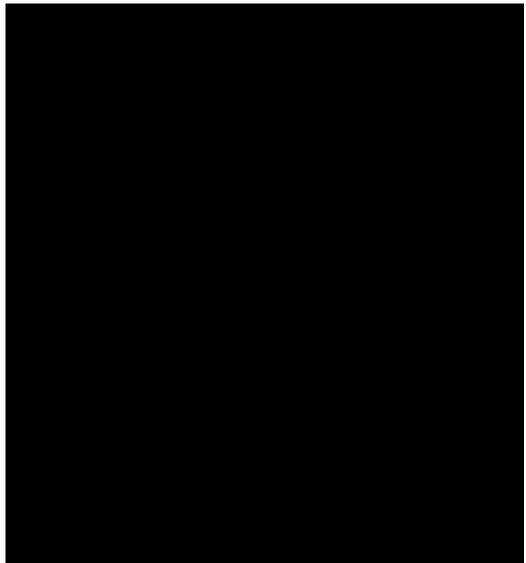
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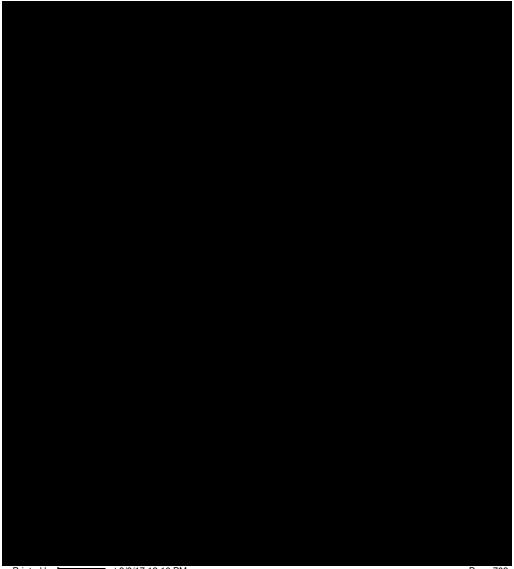
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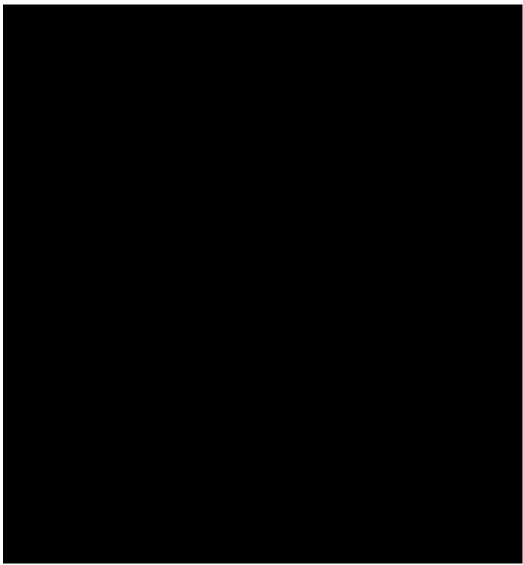
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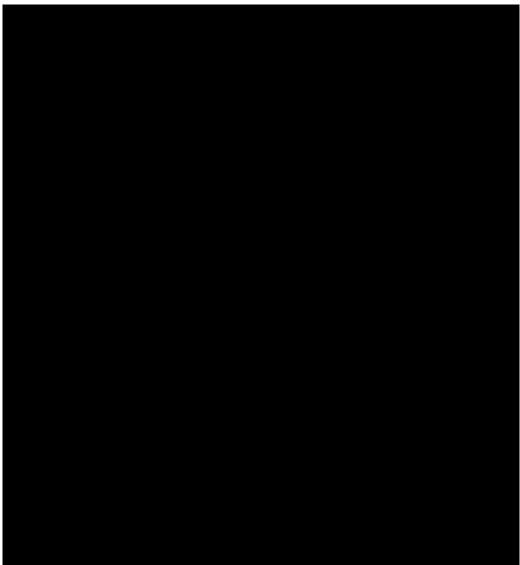
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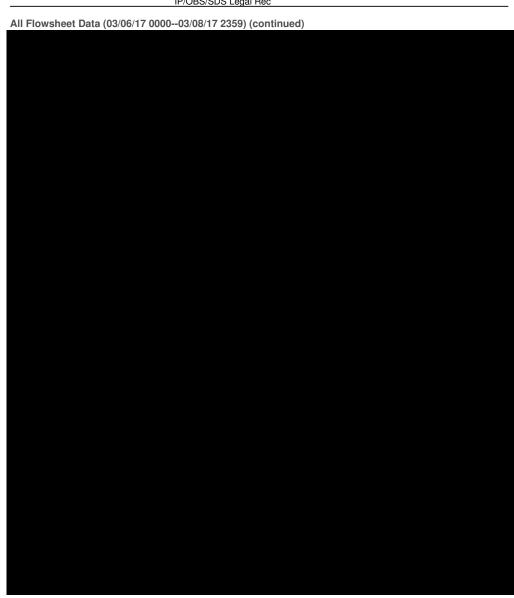
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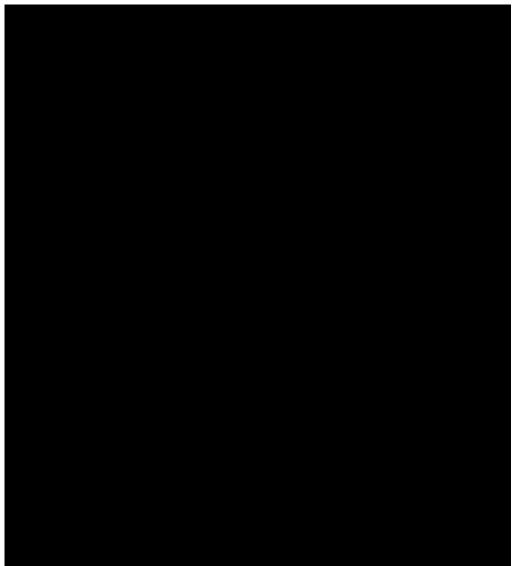
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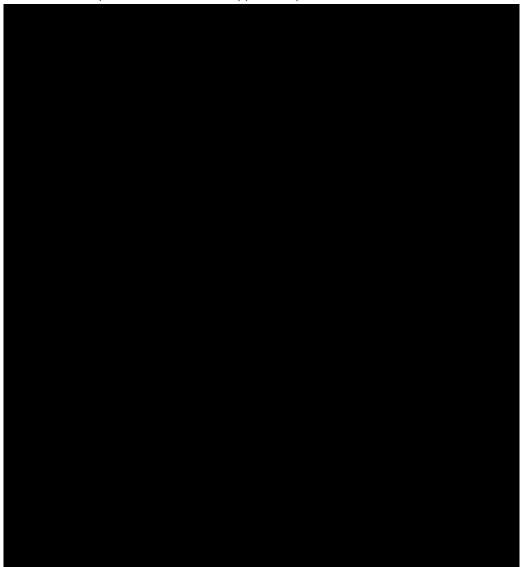
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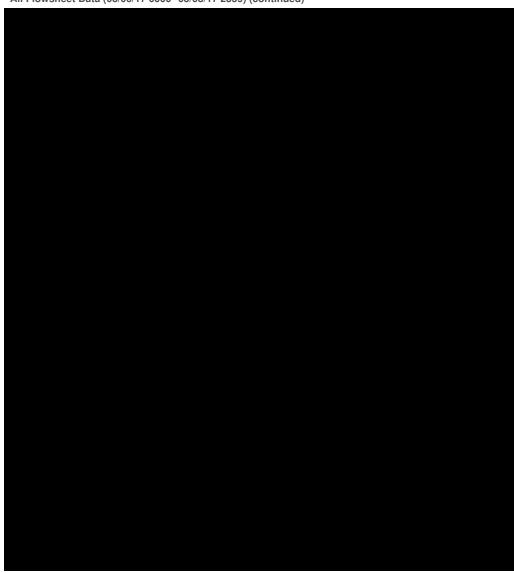
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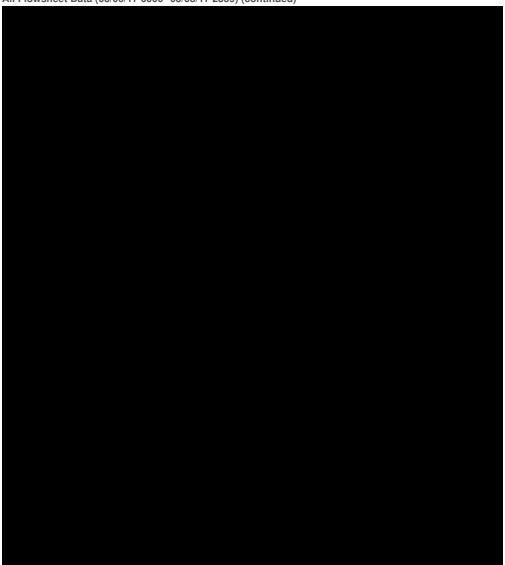
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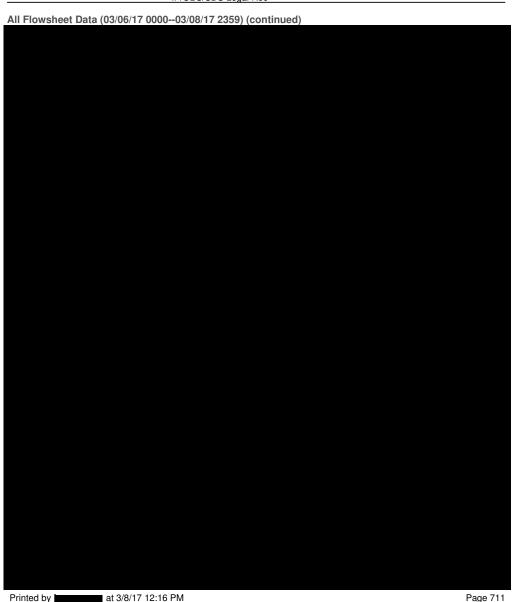
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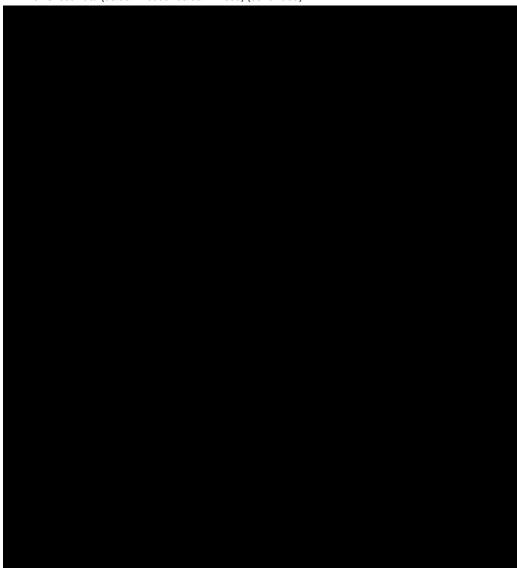
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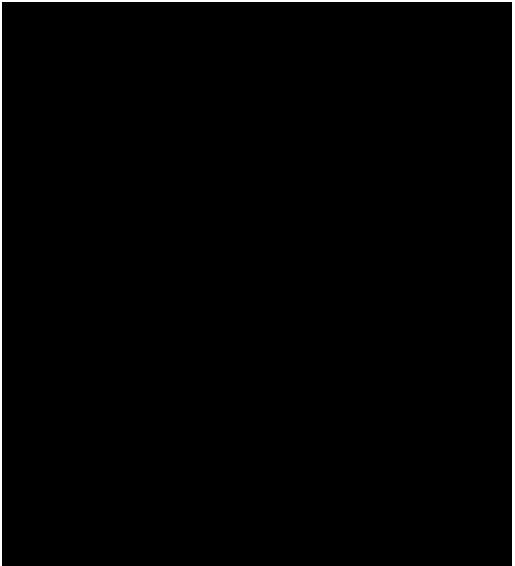
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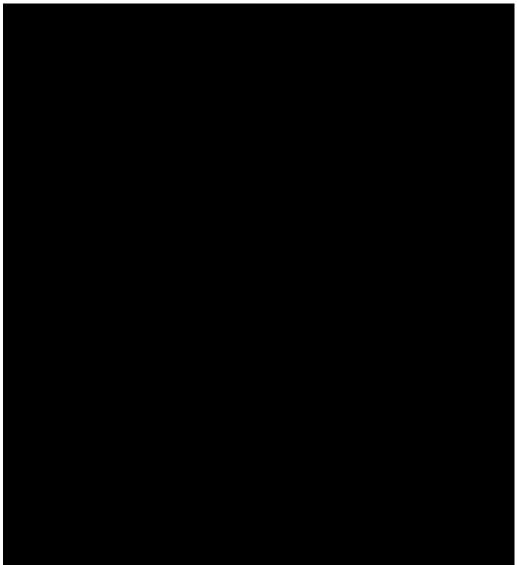
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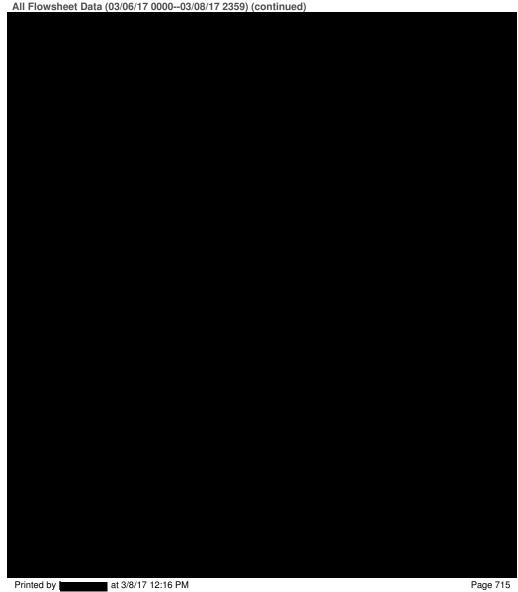
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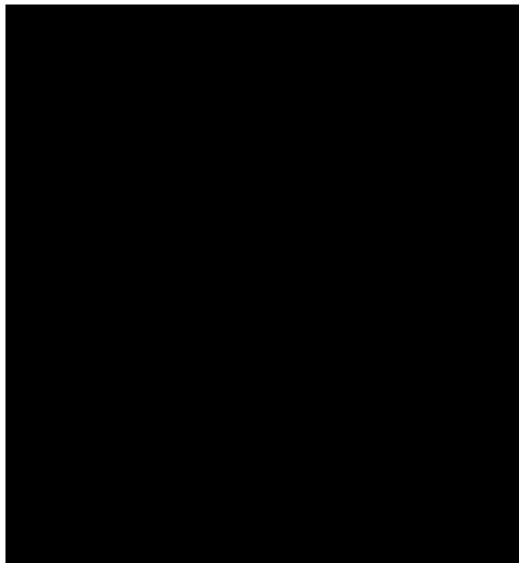
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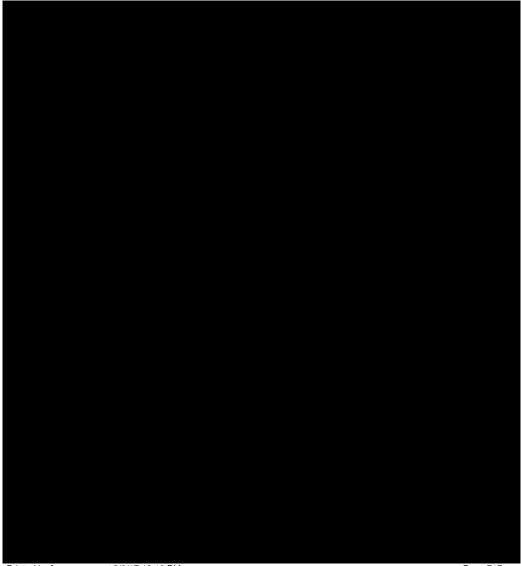
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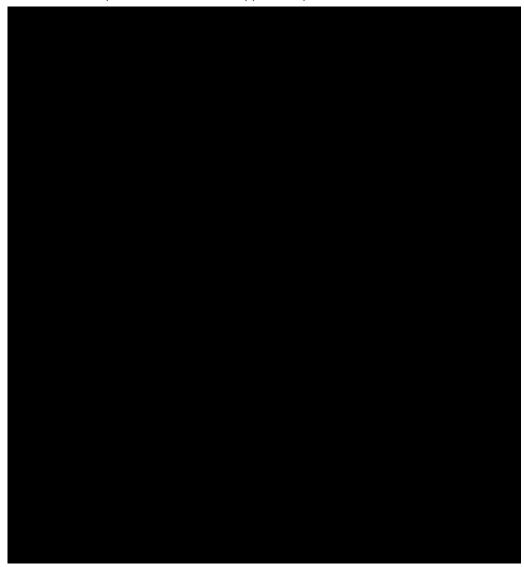
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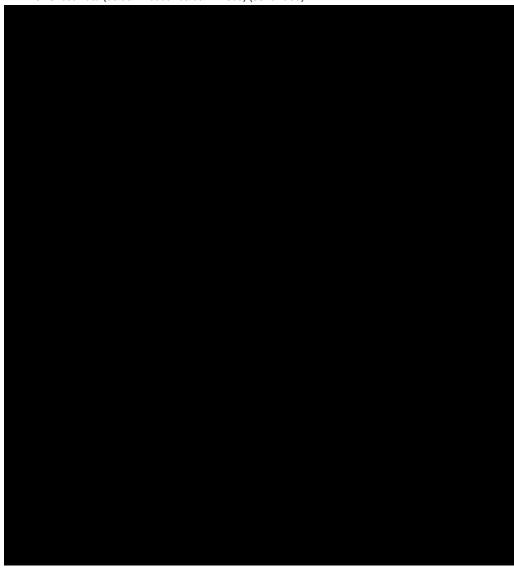
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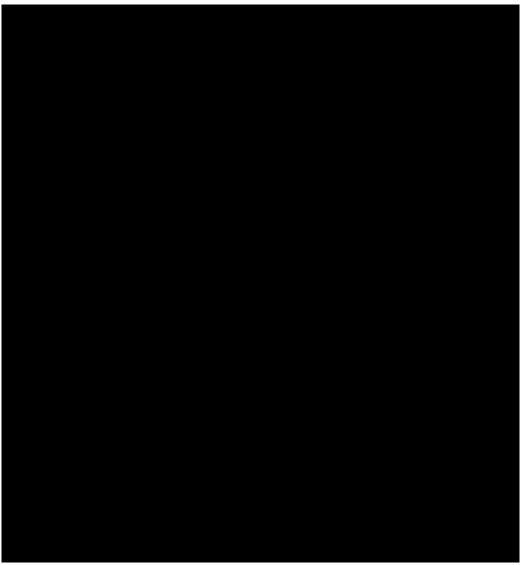
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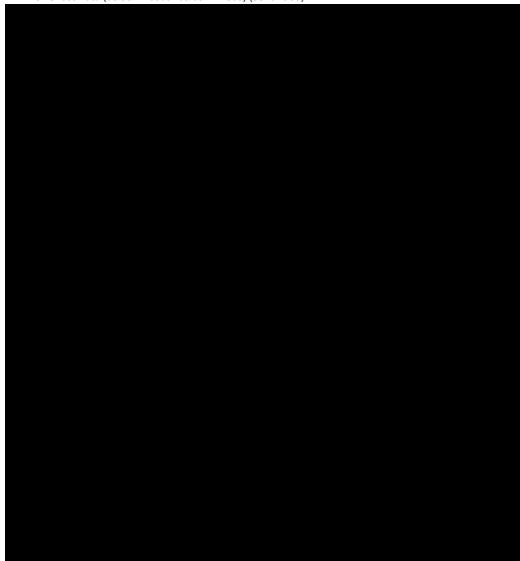
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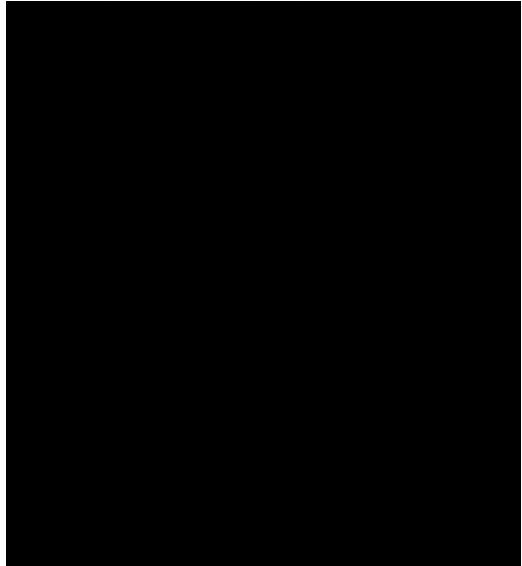
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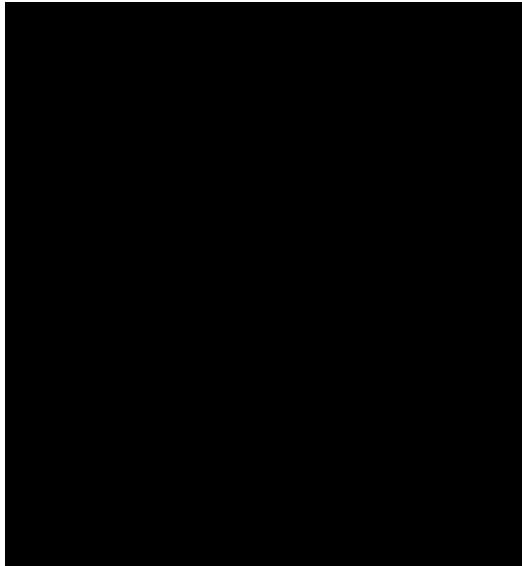
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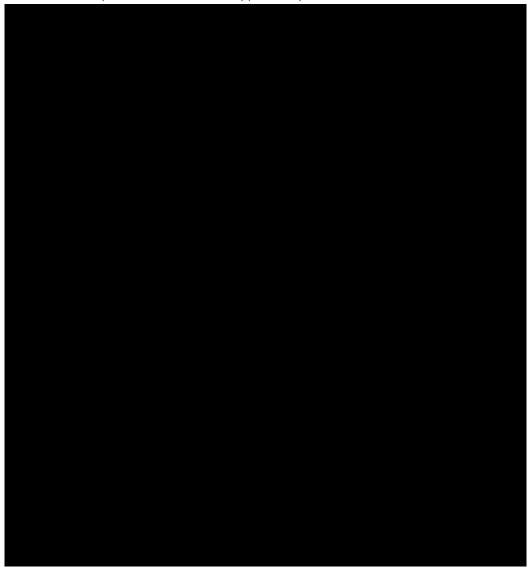
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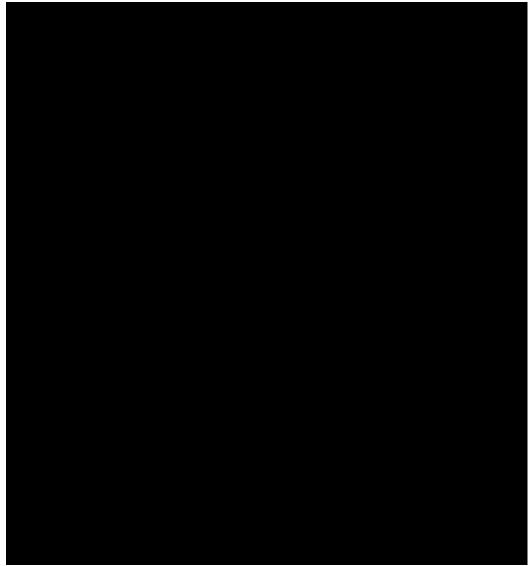
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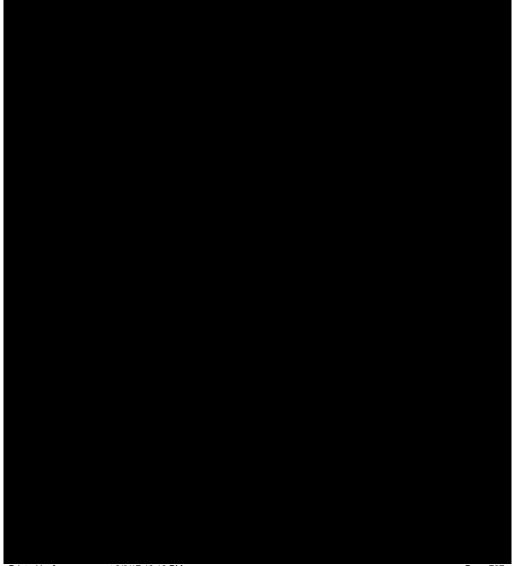
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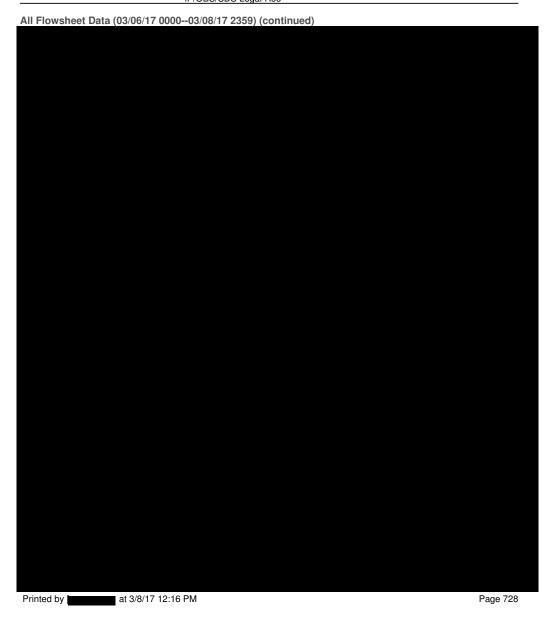
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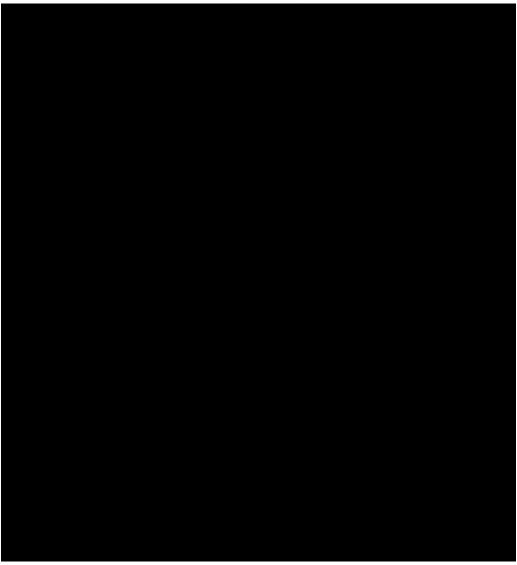
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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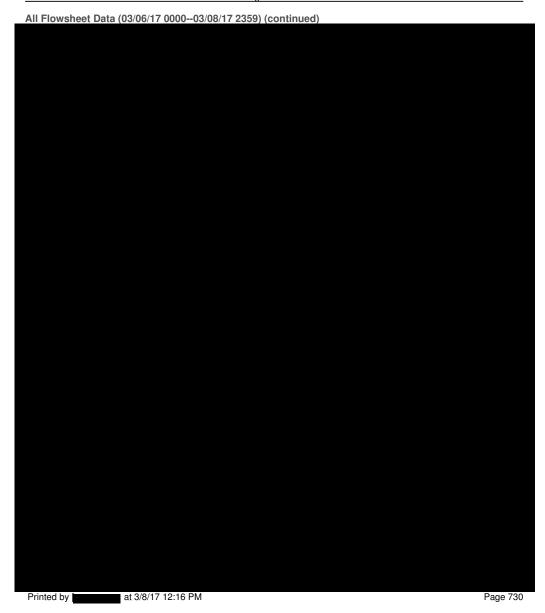
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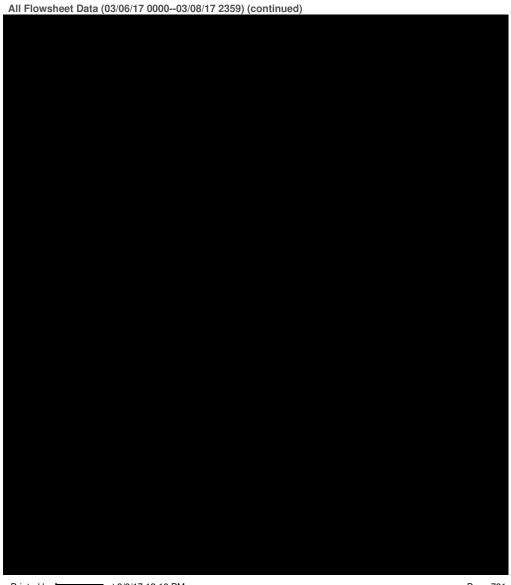
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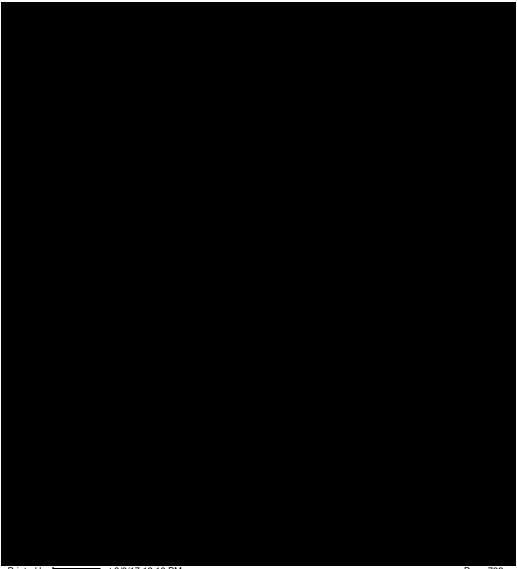
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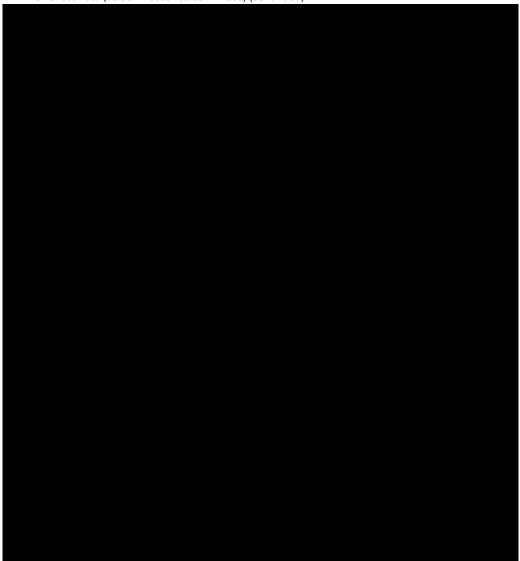
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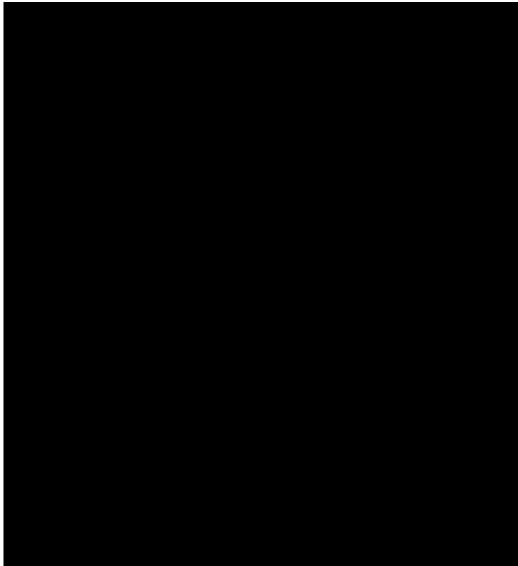
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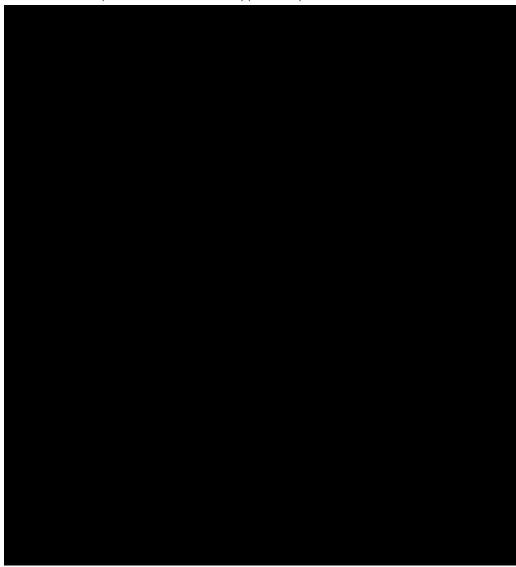
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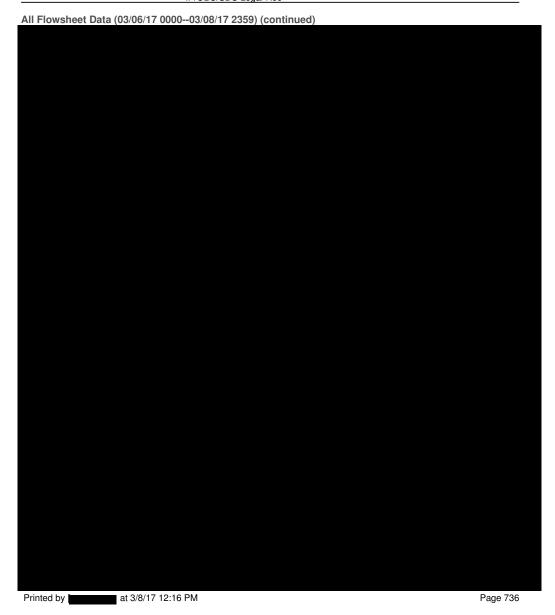
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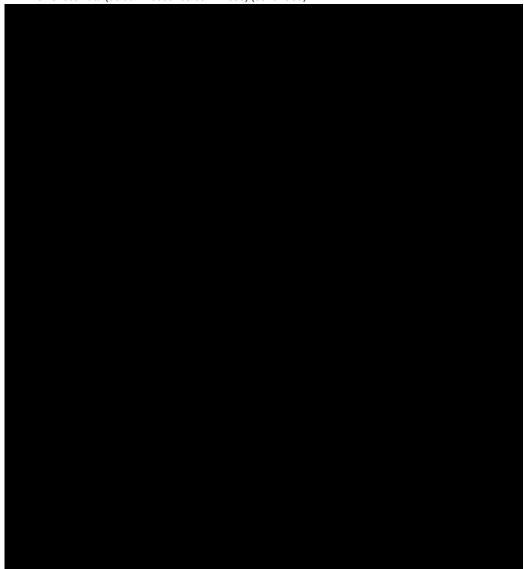
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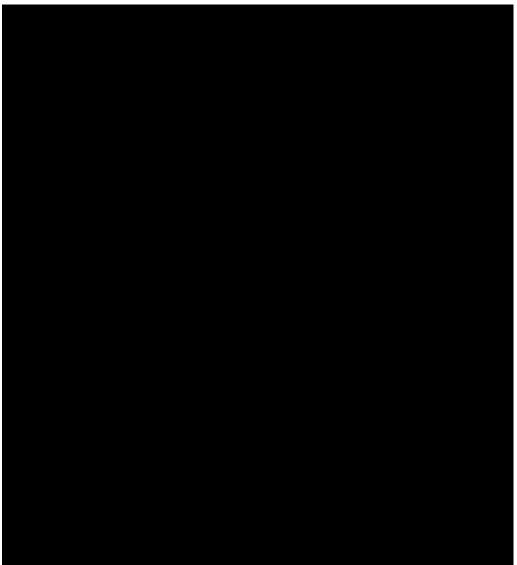
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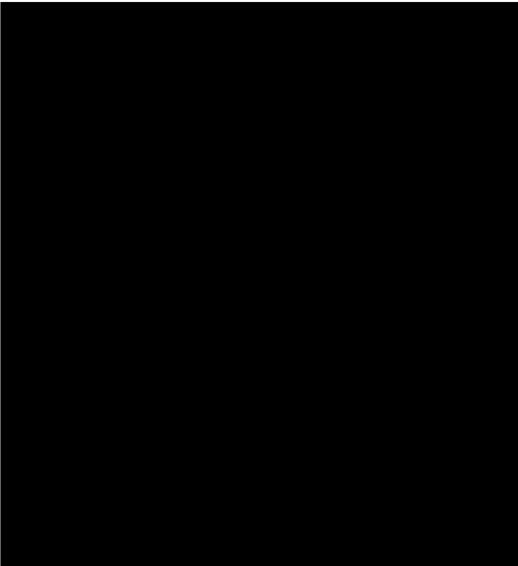
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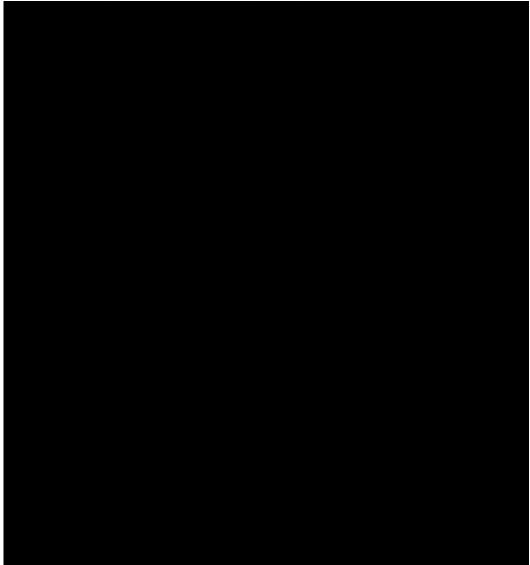
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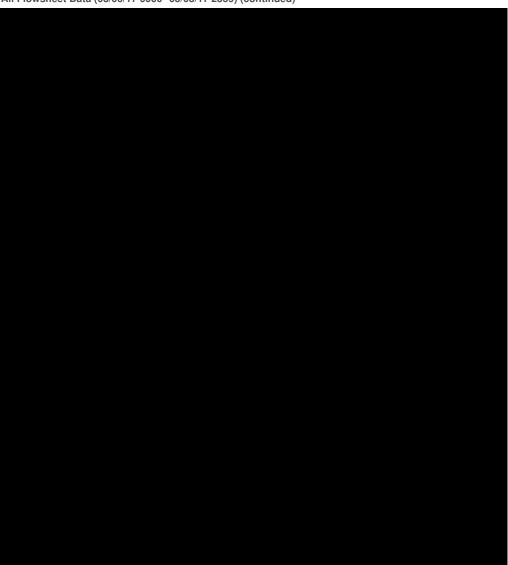
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All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)



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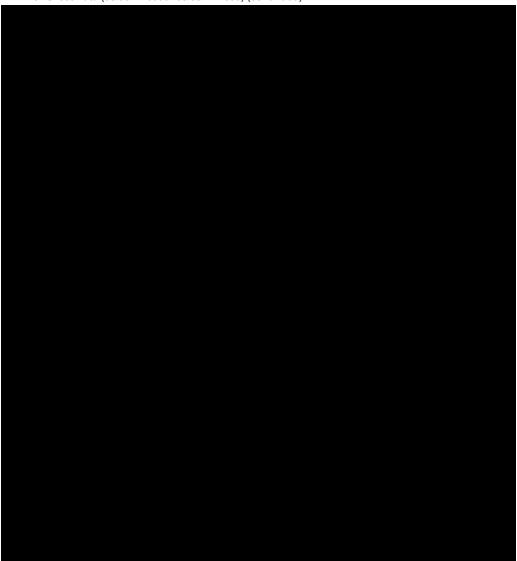
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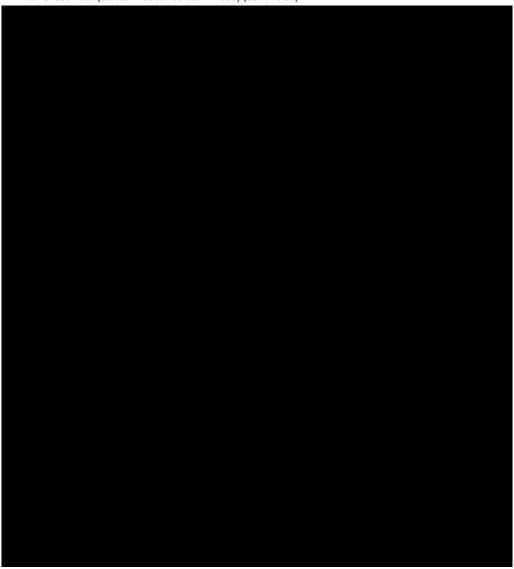
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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

All Flowsheet Data (03/06/17 0000--03/08/17 2359) (continued)

Expected Discharge (continued)

03/07/17 1020

Expected Discharge Expected 03/10/17 -LH

Discharge Date

Expected Still a patient -LH Discharge

Disposition

User Key (r) = Recorded By, (t) = Taken By, (c) = Cosigned By Initials Name Effective Dates JN MD 03/03/17 -EJ 07/02/15 -AD 10/29/15 -SAA 10/29/15 -CH 08/27/15 -MM 10/29/15 -ST 10/29/15 -MB 08/26/15 -٧S 01/09/17 -SA 10/29/15 -MC 10/29/15 -RC 10/29/15 -GD 10/29/15 -LD 10/29/15 -BD 10/29/15 -RF 10/29/15 -۷F 10/29/15 -LH RN 10/17/16 -CP 10/29/15 -AS 10/29/15 -۷A 10/29/15 -MD 10/29/15 -MK **LCSW** 09/09/15 -

All Meds and Administrations

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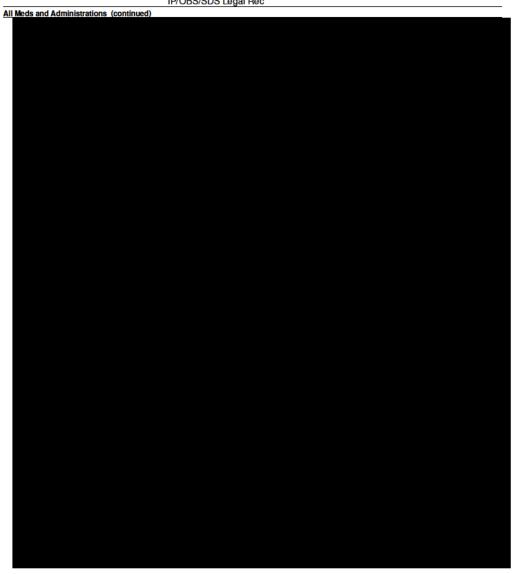
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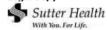
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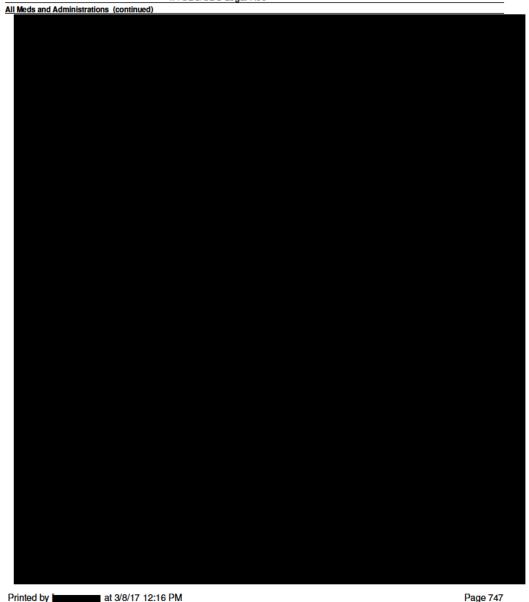
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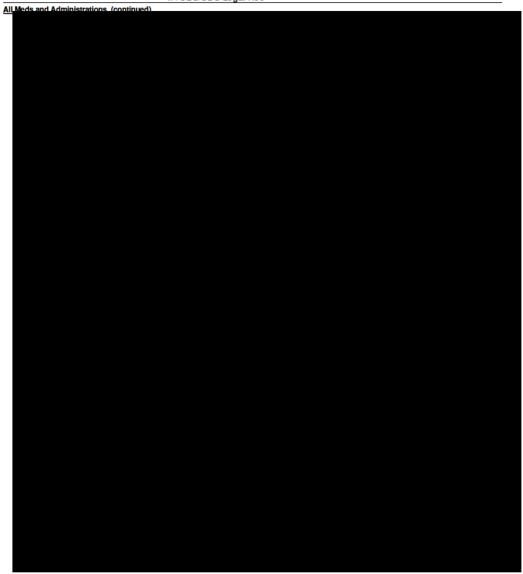
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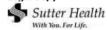
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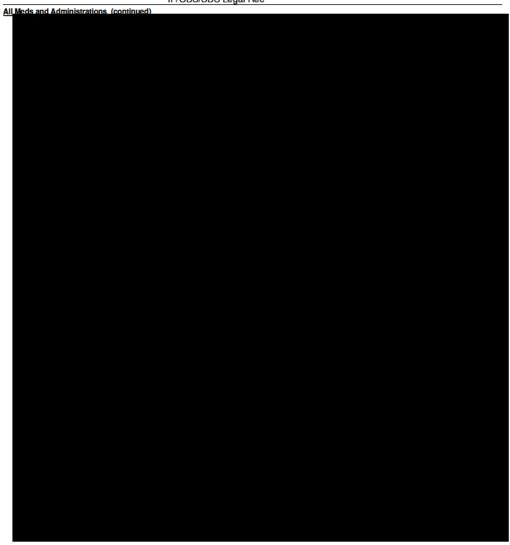
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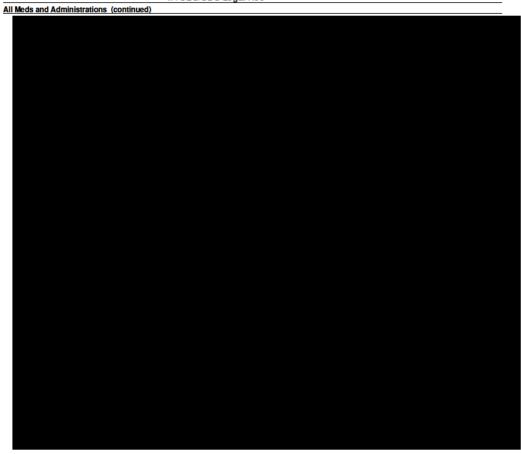
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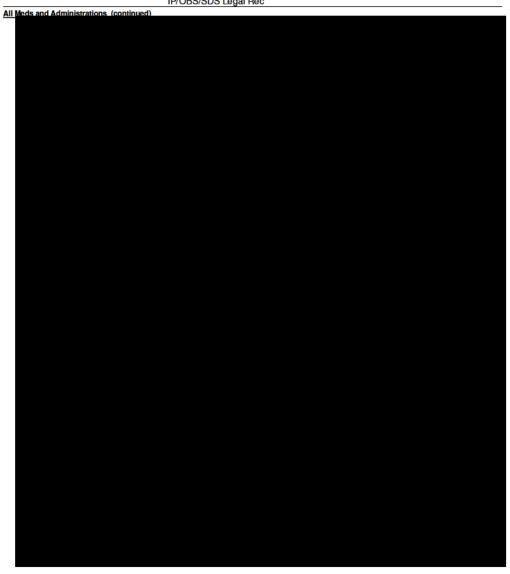
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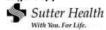
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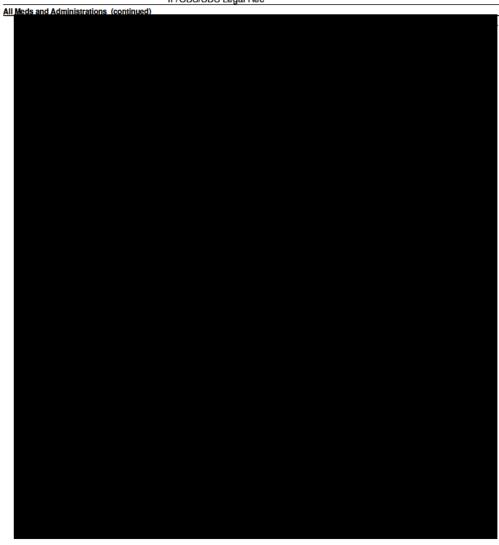
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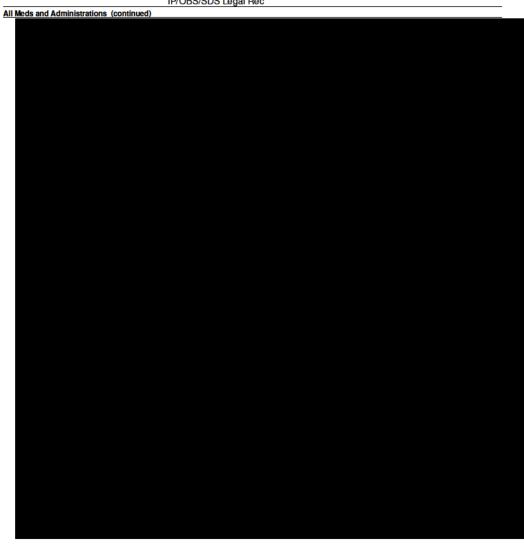
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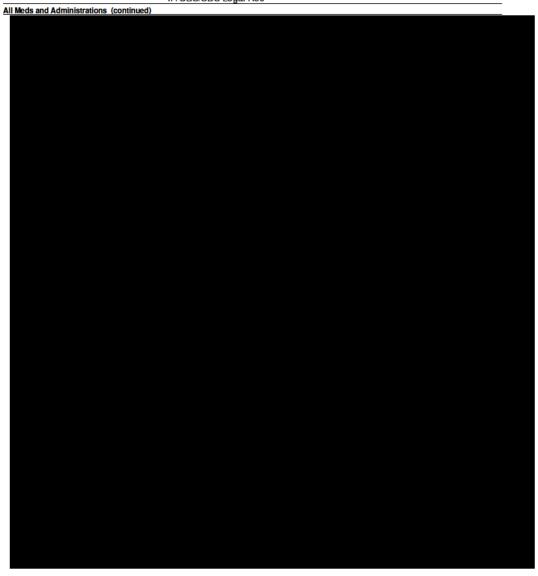
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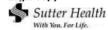
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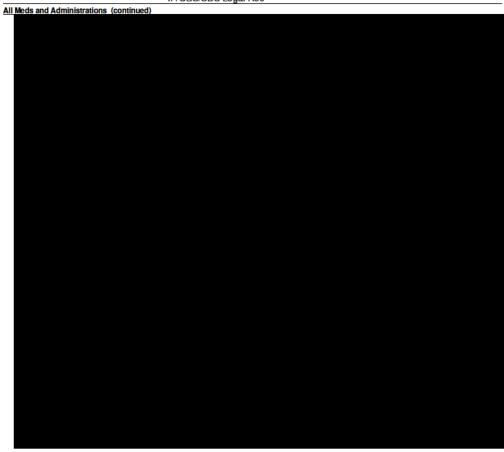
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SUTTER MEDICAL CENTER SACRAMENTO 2825 Capitol Ave Sacramento CA 95816 IP/OBS/SDS Legal Rec

HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:



Progress Notes

Care Team Note by at 03/06/17 1708 Service: Respiratory
Date of Service: 03/06/17 1708 Filed: 03/06/17 1/14 Da Editor: Crager, Ronald S (Respiratory Care Practitioner)

Author Type: Respiratory Care Practitioner Status: Signed

Pt brought to ED byEMS approx 1515 intubated bym ventilation. 1520 cpr started For five minutes. Pt had 7.0 et tube in place BS equal with a positve co2 reading on etco2 monitor.

at 03/06/17 1714

Care Team Note by Dones, Benilda at 03/06/17 1905

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by at 03/06/17 1905 (continued)
Service: ICU

Filed: 03/06/17 191

Date of Service: 03/06/17 1905

Author Type: Registered Nurse Status: Signed

1645 Pt admitted from ER, intubated, agitated but not following commands. Propofol drip titrated per MD order. Dr. at bedside, continue Hypothermia protocol. Cooling wrap applied. OGT inserted, CXR done. VSS monitored. Labs repeated. Results relayed to Dr. 1730 Target Temp reached (34 degrees Celsius).

1800 Repeated ABG, results relayed to Dr. No changes. VSS.

Signed by at 03/06/17 1911

Care Team Note by at 03/06/17 2100 Service: Respiratory
Date of Service: 03/06/17 2100 Author: Filed: 03/06/17 2203

Author Type: Respiratory Care Practitioner Status: Signed



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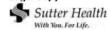
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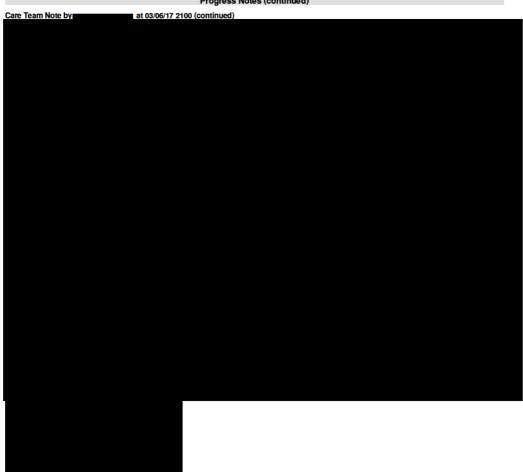


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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

Adm: 3/6/2017, D/C:

Progress Notes (continued)



Ventilator Discontinuance Protocol

Initiate Ventilator Discontinuance Protocol per physician order.

The Spontaneous Evaluation Assessment Criteria (Phase II) is:

· Sedation adequate to assess spontaneous criteria

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HERNANDEZ, JOHN ANTHONY MRN:

DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

at 03/06/17 2246 (continued)

- Glasgow Coma score to be greater than or equal to 8
- Patient's cough should not cause significant pain
- NIF greater than or equal to -20 cm H2O
- Minute ventilation less than or equal to 15 L/M
- RSBI to be less than 100 breaths per minute per liter.

Conduct initial spontaneous breathing trial (SBT) for 5 minutes:

- Continue on ventilator with no pressure support or pressure control
- Maintain PEEP
- Maintain FiO2 (less than or equal to 0.5)

At the 5-minute mark of the SBT, measure NIF, VE and RSBI. Assess for success indicators.

Success indicators:

- Systolic blood pressure between 90-180 mm Hg.
- Heart rate less than 140 beats/minute and no more than a 20% change
- No increased anxiety
- SpO2 greater than or equal to 90%
- Respiratory rate less than or equal to 35/minute and no more than a 50% change.

If the patient passes the spontaneous evaluation criteria and success indicators are met, continue for an additional 25 minutes (30 minutes total).

- After 5-minute mark, if patient exhibits increased work of breathing or anxiety, utilize T-mist or add PS
 - o 8 cm for a 7 size tube
 - o 6 cm for 8 size tube
- If patient has a tracheostomy, utilize T-mist

Obtain ABG after initial 30 minute trial and 30 minutes after any change in patient status.

A SBT is to continue for at least 30 minutes but no more than 120 minutes to assure maximum sensitivity and safety. If the patient has a history of lung disease, continue the SBT to a total of 2 hours. Reassess for success indicators at least every 30 minutes. If success indicators remain stable through the SBT, contact physician with ABG results and extubation orders.

at 03/06/17 2249

Care Team Note by at 03/06/17 2248 Service: Respiratory
Date of Service: 03/06/17 2248 Filed: 03/06/17 22

Author Type: Respiratory Care Practitioner Status: Signed



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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by

at 03/06/17 2248 (continued)

Ventilator Protocol

Patient's Name: John Anthony Hernandez

MRN: DOB: 2/10/1983 Date: 3/6/2017 Time: 10:48 PM

Ordering Physician: Dr RCP: 3/6/2017 10:48 PM

Initiate Ventilator Protocol per physician order.

- · Pulse Oximetry, continuous
- Capnography, continuous
- Correlate PetCO₂ with ABG; if the difference between PaCO₂ and PetCO₂ is less than or equal to 10 mm Hg, use the PetCO₂ values to adjust the minute volume.
- Subglottic suctioning every four hours (assess every two hours) or may use the Hi/Low Evac ET tube
- Respiratory Aerosol Medication Protocol
- Mechanical ventilator settings:
 - Select any mode that allows for criteria to be met
 - ✓ Set V_T of 6-8 ml/kg of predicted body weight
 - ✓ Set Respiratory Rate: 10-14/minute
 - ✓ Call physician if Pplat greater than or equal to 30 cm H₂O
 - ✓ PEEP of 5 cm H₂O initially
 - \checkmark FiO₂ and PEEP: Adjust to maintain SpO₂ at or above 90% or PaO₂ at or above 60.
 - ✓ Increase FiO₂ first to maintain SpO₂ at or above 90% or PaO₂ at or above 60.
 - ✓ For FiO₂ less than 0.5 and 5 cm H₂O PEEP, increase FiO₂ in 0.1 increments
 - ✓ For FiO₂ greater than 0.5 and 5 cm H2O PEEP, increase PEEP in 2-3 cm H₂O increments to a high of 15 cm H₂O unless hemodynamically unstable
- Assess for Auto PEEP upon initiation of the ventilator and at every monitoring of the ventilator. When Auto-PEEP is measured at greater than 5 cm H2O, the following actions should be taken to attempt to bring the measurement down to 5 cm H20 or below:
 - √ adjust inspiratory time and/or
 - ✓ adjust peak flow rate and/or
 - ✓ adjust inspiratory rise and/or
 - √ adjust PEEP to 5 cm H20

If these efforts are not successful, the MD is to be notified.

- Obtain ABG within 30 minutes of initial ventilator settings repeat ABG's after 30 minutes when there is a significant change of patient status or a questionable correlation in SpO2 or EtCO2/TcCO2.
- After 30 minutes
 - ✓ Maintain SpO₂ at or above 90% using above parameters
 - ✓ Adjust minute volume to keep pH 7.30 to 7.45 and PaCO₂ 30-50 mmHg

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DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by

at 03/06/17 2248 (continued)

- ✓ For patients on the Therapeutic Hypothermia Protocol, adjust minute volume to keep temperature corrected PaCO₂ 32 – 36 mmHg.
- Obtain initial chest radiograph for tube placement and contact MD for additional orders if patient status changes or suspect tube displacement.
- Perform comprehensive respiratory assessment including
 - Assessment for respiratory aerosol medication
 - Assessment for ventilator discontinuance indications (see Patient Ventilator System Check Procedure, 7.4.011)
- Obtain sputum culture upon intubation and as needed if suctioned secretions are increased or exhibit a change of color from normal, collect a sputum culture.
- If patient is nasally intubated, discuss with physician for tube replacement.
- Ventilator Discontinuance Protocol including
 - ✓ Performance of Spontaneous Evaluation Criteria
 - Evaluation of success indications for ventilator discontinuance
 - If hemodynamic stability is in question, discuss with RN and MD.
- If indications for ventilator discontinuance/safety screen are met, perform spontaneous evaluation criteria. If the spontaneous evaluation criteria fails due to the failure of the RSBI measurement, and the respiratory rate is less than 35, then the SBT can be performed.
- When spontaneous evaluation criteria are met, begin Ventilator Discontinuance Protocol.
- Contact physician to change to the ARDS Ventilator Management Protocol when either of the following conditions occur:
 - ✓ PaO₂/FiO₂ ratio less than-300 with an FiO2 of 0.6 or greater
 - · Bilaterial infiltrates seen on frontal chest radiograph

If aerosol medications are indicated, complete respiratory aerosol medication order set.



Ventilator Discontinuance Protocol

Initiate Ventilator Discontinuance Protocol per physician order.

The Spontaneous Evaluation Assessment Criteria (Phase II) is:

- Sedation adequate to assess spontaneous criteria
- · Glasgow Coma score to be greater than or equal to 8
- Patient's cough should not cause significant pain
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DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by

at 03/06/17 2248 (continued)

RSBI to be less than 100 breaths per minute per liter.

Conduct initial spontaneous breathing trial (SBT) for 5 minutes:

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Success indicators:

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Signed by at 03/06/17 2249

Author Type: Respiratory Care Practitioner Status: Signed

or: (Respiratory Care Practitioner)



RESPIRATORY SERVICES ADULT ASSESSMENT

Step1:

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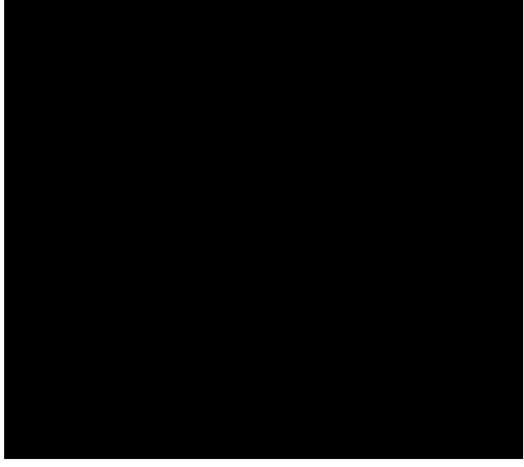
MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by at 03/06/17 2247 (con Patient's Name: John Anthony Hernandez at 03/06/17 2247 (continued)

MRN: DOB: 2/10/1983 Date: 3/6/2017

Time: 10:47 PM Chief Complaint: Cardiac Arrest



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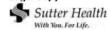
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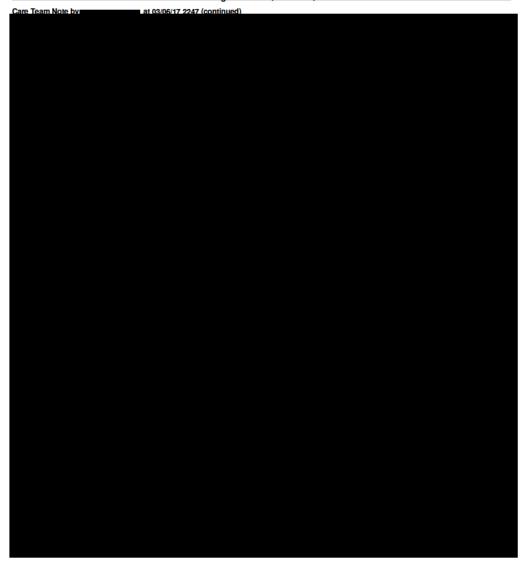
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Adm: 3/6/2017, D/C:

Progress Notes (continued)



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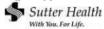
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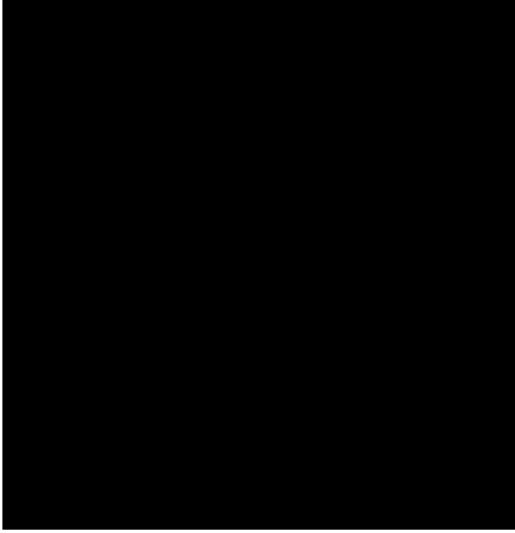
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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Care Team Note by TIME: 10:47 PM at 03/06/17 2247 (continued) DATE: 3/6/2017



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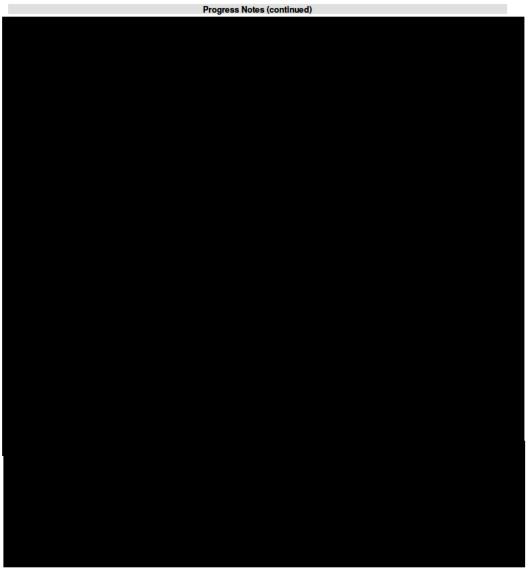
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Progress Notes (continued)

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Adm: 3/6/2017, D/C:

Care Team Note by at 03/06/17 2248 (continued)

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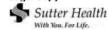
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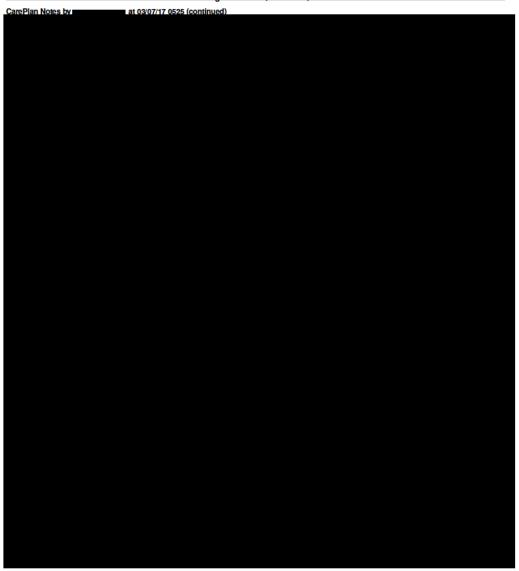


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Progress Notes (continued)



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Progress Notes (continued)



PULMONARY MEDICINE CRITICAL CARE PROGRESS NOTE

Admit Date: 3/6/2017

Patient ID:

John Anthony Hernandez is a 34-year-old male with unknown past history who apparently was behaving belligerently and combative in the field. The patient was approached by police officers who were required to use a Taser to subdued him and upon being tasered, the patient developed an acute cardiac arrest. The patient underwent CPR in the field receiving epinephrine and was Intubated prior on arrival by EMS. The patient was brought to the Emergency Room where he went into PEA, required some additional CPR with return of a blood pressure. He is now admitted to the Intensive Care Unit intubated and sedated. Toxicology screen was positive for methamphetamines.

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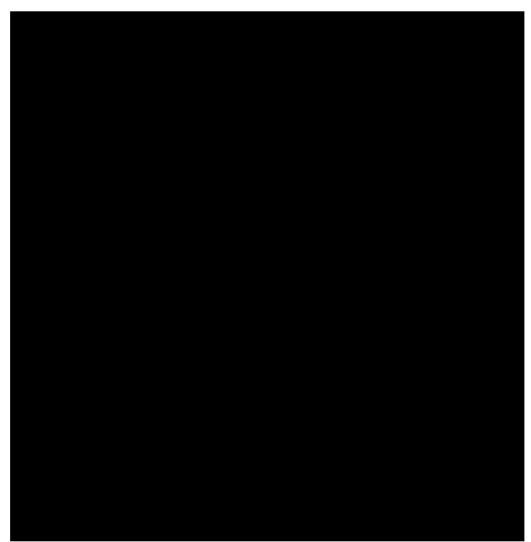
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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Progress Notes by MD at 03/07/17 0808 (continued)



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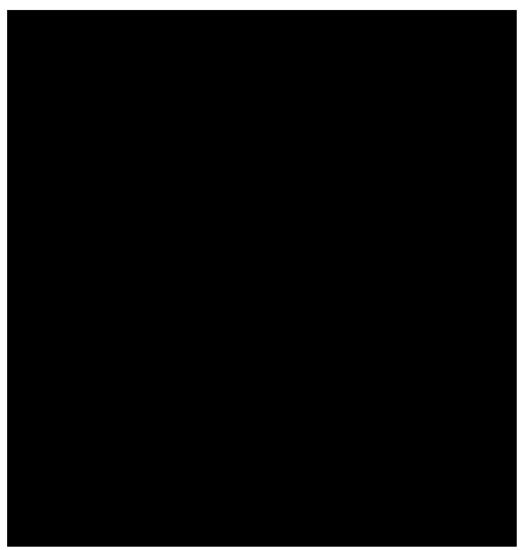


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Adm: 3/6/2017, D/C:

Progress Notes (continued)

Progress Notes by MD at 03/07/17 0808 (continued)



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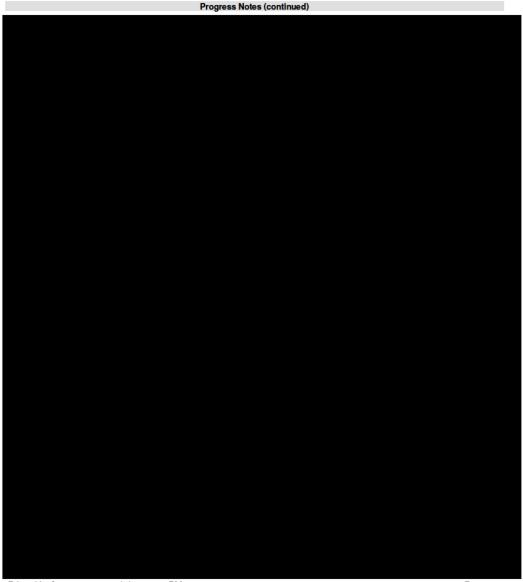
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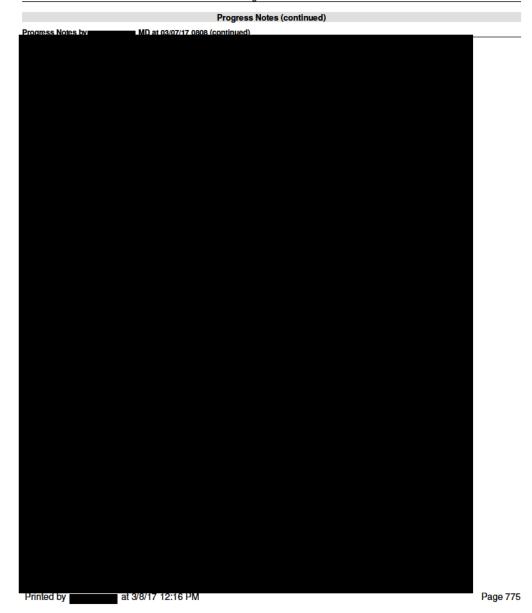
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Progress Notes (continued)

Progress Notes by MD at 03/07/17 0808 (continued)

MD at 03/07/17 0808 (continued)

IMAGING:

Ct Cervical Spine Wo Contrast

Result Date: 3/6/2017

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male PROCEDURE: CT CERVICAL SPINE WO CONTRAST, 3/6/2017 4:01 PM ACCESSION NUMBER(S): MCC17000604478 LOCATION: SAMC CLINICAL INDICATION: Injury. COMPARISON: None TECHNIQUE: Helical non-contrast CT images were obtained through the cervical spine with 2 mm sagittal and coronal reformats. FINDINGS: Osseous /disc structures: Normal bony alignment without fracture or dislocation. Vertebral body height well-maintained. Disc space height well-maintained. Soft tissues: Mild patchy infiltrate in the medial right upper lung field. Patient is intubated. C2-3: No bony canal or foraminal narrowing. C3-4: No bony canal or foraminal narrowing. C4-5: No bony canal or foraminal narrowing. C6-7: No bony canal or foraminal narrowing. C7-T1: No bony canal or foraminal narrowing.

IMPRESSION: No acute fracture or subluxation in the cervical spine. Total exam Dose Length Product for a 580 mGy-cm Total exam CT Dose Index 22.1 mGy Electronically Signed by Med, Sutter Medical Group 3/6/2017 4:41 PM

Ct Brain Wo Contrast

Result Date: 3/6/2017

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983
GENDER: Male PROCEDURE: CT BRAIN WO CONTRAST, 3/6/2017 4:01 PM ACCESSION NUMBER(S): MCC17000603841 LOCATION: SAMC CLINICAL INDICATION: ALOC. COMPARISON: None TECHNIQUE: Axial non-contrast CT images were obtained from the skull base to the vertex at 5 mm slice

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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

MD at 03/07/17 0808 (continued) thickness in brain and bone algorithm. FINDINGS: Brain: Ventricles and sulci appropriate for age. No midline shift, acute intracranial hemorrhage, or hydrocephalus. Probable small arachnoid cyst in the posterior aspect of the posterior fossa. Orbits: Visualized portions are within normal limits. Sinuses and otomastoids: No mucosal thickening or air-fluid levels. Calvarium: Unremarkable. Visualized soft tissues: Unremarkable.

Progress Notes (continued)

IMPRESSION: No acute intracranial process. Total exam Dose Length Product for a 671 mGy-cm Total exam CT Dose Index 38.3 mGy Electronically Signed by Med, Sutter Medical Group 3/6/2017 4:35 PM

Xr Chest Portable

Result Date: 3/6/2017

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male PROCEDURE: XR CHEST PORTABLE, 3/6/2017 5:02 PM ACCESSION NUMBER(S): MCD17000605811 LOCATION: SAMC COMPARISON: 3/6/2016 at 3:45 PM CLINICAL INDICATION: ET Tube. Line placement. TECHNIQUE: Portable AP view of the chest. FINDINGS: ET tube remains in place with distal tip positioned approximately 3 cm above the carina. There has been interval placement of a nasogastric tube, with distal end extending into the left upper quadrant of the abdomen, although distal tip is excluded from the field-of-view. Lungs are bilaterally well expanded. No confluent areas of lung consolidation or pleural effusions. Heart and mediastinal structures appear stable. There is persistent prominence of the central pulmonary vasculature noted bilaterally, right greater than left.

IMPRESSION: 1. Interval placement of nasogastric tube. ET tube remains in satisfactory position. 2. Persistent prominent central pulmonary vascular congestion, right greater than left, without significant interval change. Cannot exclude underlying adenopathy. Electronically Signed by MD, Sutter Medical Group 3/6/2017 5:54 PM

Xr Chest Portable

Result Date: 3/6/2017

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male PROCEDURE: XR CHEST PORTABLE, 3/6/2017 3:28 PM ACCESSION NUMBER(S): MCD17000603785 LOCATION: SAMC CLINICAL INDICATION: Chest Pain. COMPARISON: None TECHNIQUE: Single AP view of the chest. FINDINGS: Mediastinum and hila: Hila appear mildly prominent. Lines and tubes: Endotracheal tube tip 3.5 cm above the carina. Lungs and pleura: Mild pulmonary vascular congestion with very mild interstitial prominence. No definite focal consolidation, pneumothorax or pleural effusion. Bones and soft tissues: The osseous structures are unremarkable.

IMPRESSION: Mild pulmonary vascular congestion with mild interstitial prominence may represent mild interstitial pulmonary edema. Mild prominence the hila may simply represent prominence of the central pulmonary arteries however underlying adenopathy is not excluded. When patient is able recommend dedicated PA and lateral views of the chest to better evaluation. Electronically Signed by Sutter Medical Group 3/6/2017 4:10 PM

Printed by at 3/8/17 12:16 PM

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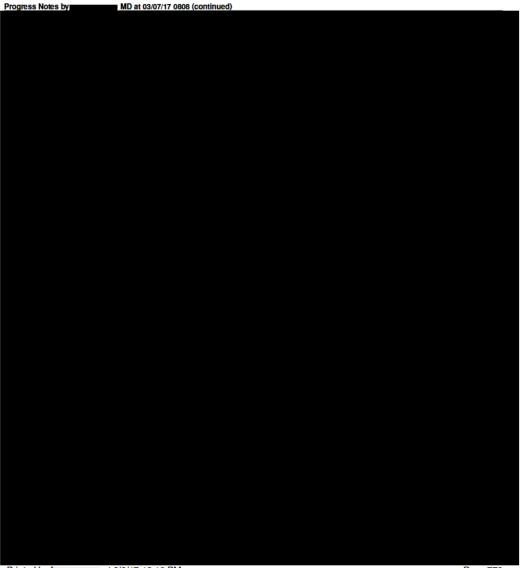


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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M

Adm: 3/6/2017, D/C:

Progress Notes (continued)



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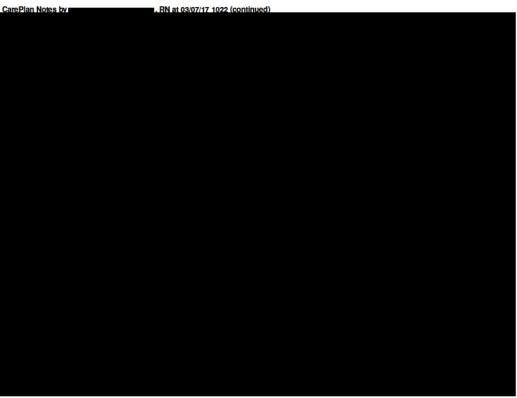


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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)



CarePlan Notes by

LCSW at 03/07/17 1222

LCSW Service: Social Services
Date of Service: 03/07/17 1222
LCSW (Licensed Clinical Social Worker)

Author Type: Licensed Clinical Social Worker Status: Signed

Problem: Patient Care Overview Goal: Plan of Care Review

Outcome: Ongoing (interventions implemented as appropriate)
CLINICAL SOCIAL WORK PROGRESS NOTE

Data: SW referred in to identify family.

Patient brought in yesterday post cardiac arrest after being tased. Sac Police report, #17-69178. Paperwork at bedside indicates he was released from Police custody at 5:00 this morning. No belongings at bedside, RN reports that police took his belongings. Thus, no way to identify family or SDM by information that might be in

his wallet or cell phone.

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

CarePlan Notes by

LCSW at 03/07/17 1222 (continued) The address on the face sheet is the address for Salvation Army Adult Rehab, called and talked to reports patient was not staying with them. Address on ambulance run is

. Unclear if this is his home address, when he last lived there, why he is in Sacramento. No phone number listed with this address.

Spoke with Sac PD, 808-5471 asked if they are able to provide hospital with family or contact information from patient's belongings or records. He responded that "patient is on black out" and he would have to speak with his supervisors before releasing any contact information. Currently patient is "confidential" patient at the hospital.

Patient's name is common and difficult to identify through on-line searches.

Patient positive for meth at admit.

Assessment: Unable to identify family members or friends to act as SDM. Unclear patient's living situation.

Plan: Will await response from Sac PD regarding SDM information.

Clinical Social Worker:

LCSW 3/7/2017

11:40 AM

LCSW at 03/07/17 1222

CarePlan Notes by LCSW at 03/07/17 1530 Social Services LCSW (Licensed Clinical Social Worker)

Author Type: Licensed Clinical Social Worker Status: Signed

Problem: Patient Care Overview Goal: Plan of Care Review

Outcome: Ongoing (interventions implemented as appropriate) CLINICAL SOCIAL WORK PROGRESS NOTE

Data: Officer A Pettit present for update on patient. SW asked Officer Pettit to follow through to see if any family members have been identified. He called in, reported there is no family identified at this time. Will let the officer in the ED know if anyone is identified and they will let the floor know.

Assessment: No family or SDM identified by police.

Plan: SW to continue to follow to attempt to identify SDM.

Clinical Social Worker:

3/7/2017 3:27 PM

Printed by at 3/8/17 12:16 PM

LCSW

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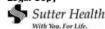


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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

CarePlan Notes by LCSW at 03/07/17 1530 (continued)

Signed by LCSW at 03/07/17 1530

CarePlan Notes by at 03/07/17 1715

ithor: Service: ICU
ed: 03/07/17 1715
Date of Service: 03/07/17 1715

Author Type: Registered Nurse

Problem: Patient Care Overview

Goal: Plan of Care Review

Outcome: Ongoing (interventions implemented as appropriate)

EOSS: Pt s/p cardiac arrest following Sac PD contact tazing due to pt being belligerent and disruptive. Hypothermia protocol ends at 1730, slow rewarming per protocol. Pt's creatinine worse, no UOP since 1200, on bicarb gtt. Social worker was not able to locate family but informed by SAC PD that they were able to locate a relative with contact info. Police officer will only release relative info to social worker who has left for the day. Obtained detective Eddie Macaulay 916-956-4554 for further info. Plan to wait for pt to rewarm and monitor neuro status, contact relative and if making any neuro improvement without sedation will discuss hemodialysis.

Signed by at 03/07/17 1715

Care Team Note by at 03/07/17 0748

Author: Service: ICU Author Type: Registered Nurse
Filed: 03/07/17 0748 Status: Signed

Status: Signed

Pt on hypothermia protocol goal temp achieved at 3/6/17 1730 with labs every 6 hrs. Pt sedated and intubated on fentanyl and propofol gtts. Weak gag and cough reflex with suctioning. Pupils equal at 2.5 mm but sluggish, oral care done without issues. Urine concentrated, tea colored via foley and creatinine increased. FMS in placed irrigated and flush with free water without resistance. OGT at 65 cm to bottom lip with dark brown drainage via LIWS. SCDs in placed. No family at bedside but social work consulted to aid with locating family. Left arm NIBP 15-20 pts higher than ABP via right radial.Dr. at bedside rounding, updated on increased creatinine, concentrated low UOP, + gastric occult via OGT. No new orders for now. Plan to evaluate once rewarming process starts at 1730 today.

1018 AM rounds completed with Dr. discussed concern for concentrated urine output with foley patency checked with irrigation, CK 70170, no central line so not able monitor CVP, ionized calcium 0.99. Order received for bicarb gtt and placement of central line after rounds.

1055 Dr. at bedside to place central line, still waiting for pharmacy to deliver bicarb drip.

1110 Labs drawn via right radial aline, left subclavian TLC, dressing applied aseptically.

1129 Pt moderately shivering, pt's temp 36.2, lowered cooling machine temp to 35.2 and Dr. notified o shivering. Requested to start with demerol first before nimbex. Order received.

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Progress Notes (continued)

Care Team Note by at 03/07/17 0748 (continued)

1140 PCXR done, Dr. reviewed film at bedside, verbally ordered OK to use TLC, transduced CVP via distal port running about 7. Pharmacy called regarding bicarb gtt. Shivering improved after demerol.

1310 Dr. paged, pt has no UOP for 2 hrs, bicarb gtt started at 1148.

returns page, discussed lack of UOP for 2 hrs and creatinine increased to 3.07., No new orders.

1408 Dr. at bedside, still no urine and foley irrigated again no resistance. No new orders and social is not able to locate family at this time, waiting of Sac PD for call back.

1610 Suggested calcium chloride for Ionized calcium of 0.94, remains anuric. Ordered 1 amp of calcium chloride. Will recheck labs at 1700. No neuro change. Therapeutic hypothermia ends at 1730.

1700 Slowly weaning sedation and room thermostat set to 70 from 68 degrees to start rewarming slowly at 1730.

1735 Pt's mother called unit inquiring about pt. Per mother she was notified by Sac PD. Verified pt's DOB with mother. Mother was distraught, crying and upset. Reassured pt and instructed to focus on son and to get to sacramento safely from Given address and phone number to hospital. SAC PD at bedside also updated.

1800 Pt's brother at bedside, update given, questions addressed, reassured and POC discussed. Brother very supportive, calm and cooperative.

1910 Report given to RN, endorsed pt in rewarming process, stable condition, labs next at 2300.

at 03/07/17 1911

Care Team Note by at 03/07/17 2003 Service: Respiratory
Date of Service: 03/07/17 2003 (Respiratory Care Practitioner)

Author Type: Respiratory Care Practitioner Status: Signed

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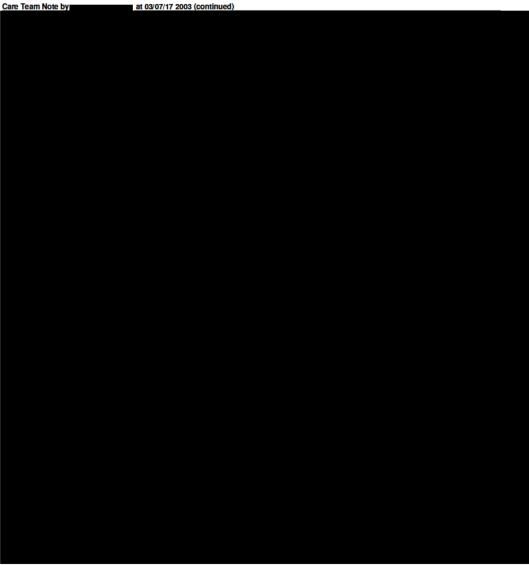


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Progress Notes (continued)



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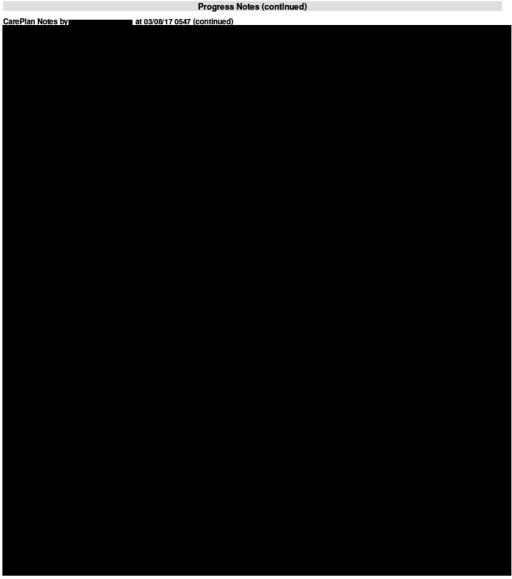
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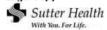


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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

Progress Notes by MD

MD (Physician)

MD at 03/08/17 0812

Service: Pulmonary Medicine
Date of Service: 03/08/17 0812

Author Type: Physician Status: Signed

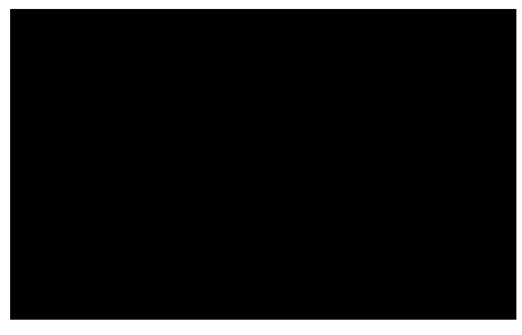


PULMONARY MEDICINE CRITICAL CARE PROGRESS NOTE

Admit Date: 3/6/2017

Patient ID:

John Anthony Hernandez is a 34-year-old male with unknown past history who apparently was behaving belligerently and combative in the field. The patient was approached by police officers who were required to use a Taser to subdued him and upon being tasered, the patient developed an acute cardiac arrest. The patient underwent CPR in the field receiving epinephrine and was Intubated prior on arrival by EMS. The patient was brought to the Emergency Room where he went into PEA, required some additional CPR with return of a blood pressure. He is now admitted to the Intensive Care Unit intubated and sedated. Toxicology screen was positive for methamphetamines.



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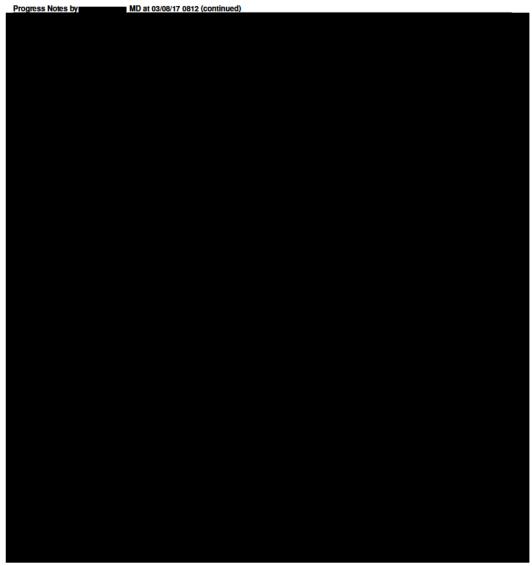
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Adm: 3/6/2017, D/C:

Progress Notes (continued)



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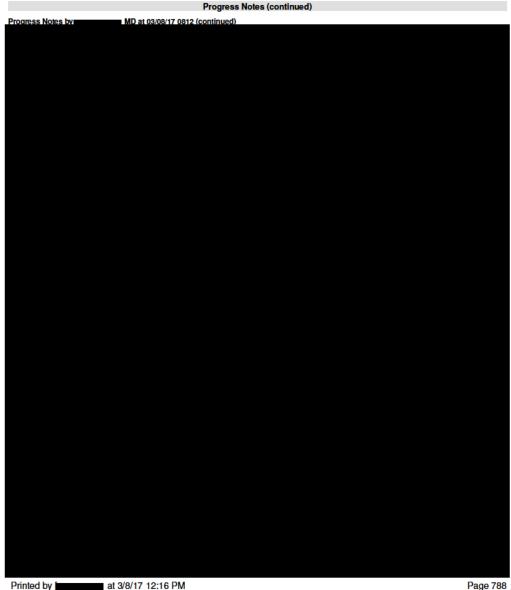
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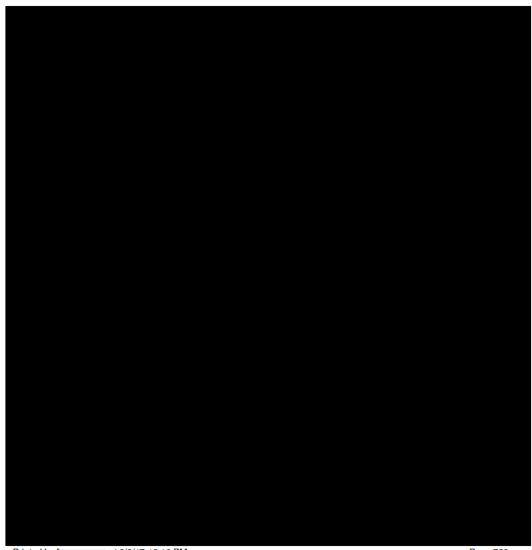
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Adm: 3/6/2017, D/C:

Progress Notes (continued)

Progress Notes by MD at 03/08/17 0812 (continued)



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Progress Notes (continued)



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MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)

MD at 03/08/17 0812 (continued) Progress Notes by

IMAGING:

Xr Chest Portable

Result Date: 3/7/2017

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male PROCEDURE: XR CHEST PORTABLE, 3/7/2017 11:29 AM ACCESSION NUMBER(S): MCD17000612385 LOCATION: SAMC CLINICAL INDICATION: Post-Procedure. COMPARISON: 3/6/2017 TECHNIQUE: Portable semi-upright frontal examination of the chest. Exam is limited by material external to the patient, possibly a heating blanket. FINDINGS: Heart and Mediastinum: The heart is normal in size. The mediastinum is normal. The aorta is normal. Tubes and Lines: Endotracheal tube is seen with its tip approximately 4.4 cm above the carina. Nasogastric tube has its tip in the stomach. Left subclavian vein triplelumen catheter has its tip in the low SVC. Lungs: The lungs are clear. There is no pleural effusion or Osseous Structures/Other: Osseous structures are unremarkable. pneumothorax.

IMPRESSION: Life-support hardware is in satisfactory position. No pneumothorax. Limited exam, as above. Electronically Signed by , MD, Sutter Medical Group 3/7/2017 12:24 PM

MD

Pulmonary Medicine, Infectious Diseases and Critical Care

MD at 03/08/17 0813 Signed by

Care Team Note by at 03/08/17 0856

Service: Respiratory Date of Service: 03/08/17 0856

Author Type: Respiratory Care Practitione Status: Signed

Signed by at 03/08/17 0856

CarePlan Notes by PT at 03/08/17 0938

Author Type: Physical Therapist Status: Signed

Problem: Patient Care Overview

Goal: Plan of Care Review

Unable to progress with Early Active Mobility ICU protocol with Physical Therapy today. The patient is not meeting safety criteria due to RASS-3. Nursing to continue daily passive mobility range of motion and repositioning per protocol. PT following Monday through friday for reassessments.

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Legal Copy SUTTER MEDICAL CENTER HERNANDEZ, JOHN ANTHONY Sutter Health MRN: **SACRAMENTO** With You, For Life. DOB: 2/10/1983, Sex: M 2825 Capitol Ave Adm: 3/6/2017, D/C: Sacramento CA 95816 IP/OBS/SDS Legal Rec **Progress Notes (continued)** CarePlan Notes by PT at 03/08/17 0938 (continued) Type: Respiratory Care Practitioner Signed Care Team Note by at 03/08/17 0944 Service: Respiratory
Date of Service: 03/08/17 0944 at 03/08/17 0947 LCSW at 03/08/17 1100
Service: Social Services CarePlan Notes by Author Type: Licensed Clinical Social Worker Status: Signed Date of Service: 03/08/17 1100 LCSW (Licensed Clinical Social Worker) **Problem: Patient Care Overview** Goal: Plan of Care Review Outcome: Ongoing (interventions implemented as appropriate) CLINICAL SOCIAL WORK PROGRESS NOTE Data: Family has been contacted by PD, they have gathered at bedside. Family includes patient's mother, SO, who he lives with, brother sister, wife, and daughter, age 7, other frie Called Child life specialist to assist with Other friends and family at bedside. SW to meet with family to discuss who will be primary SDM. Assessment: Family appropriately concerned about patient and the events that led to her hospitalization. They are calm, compliant in hospital environment, able to understand medical information. Plan: Assign SDM, continue to be present to support family, adjustment to illness, assess patient when he is able to engage. Clinical Social Worker: LCSW 3/8/2017 10:54 AM LCSW at 03/08/17 1100 Care Team Note by at 03/08/17 1103 Author Type: Respiratory Care Practitioner Status: Signed ervice: Respiratory ate of Service: 03/08/17 1103

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HERNANDEZ, JOHN ANTHONY MRN:

DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued) Care Team Note by at 03/08/17 1103 (continued) at 03/08/17 1104 CarePlan Notes by LCSW at 03/08/17 1152 Service: Social Services Author Type: Licensed Clinical Social Worker Date of Service: 03/08/17 1152 LCSW (Licensed Clinical Social Worker) **Problem: Patient Care Overview** Goal: Plan of Care Review

Outcome: Ongoing (interventions implemented as appropriate)
- CLINICAL SOCIAL WORK PROGRESS NOTE

Data: Spoke with patient's mother, ,209-253-9964. She agreed to act as SDM with the 831-435-8124. support of patient's ex-wife,

lives in last saw patient 2 months ago. She reports he has used substances since the age of 18. He has been in and out of jail and has had gang involvement.

He has been in and out of substance abuse treatment centers, left the last two he was admitted to before completing program.

His current SO, drinks ETOH and "is not a stable influence for him. They have been together for about 4 months.

struggling with what has happened to her son. She is open to support, able to understand medical information and is an appropriate decision maker.

Plan: SW to continue to follow for support, assist with decision making as needed.

Clinical Social Worker: LCSW 3/8/2017 11:42 AM



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Progress Notes (continued)

CarePlan Notes by at 03/08/17 1153 (continued)

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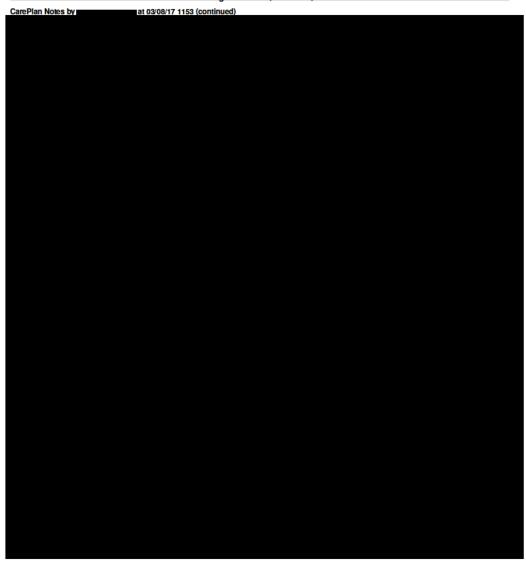
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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Progress Notes (continued)



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Progress Notes (continued)

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Care Team Note by at 03/08/17 1153 (continued)

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Progress Notes (continued)

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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983. Sex: M

Adm: 3/6/2017, D/C:

Encounter-Level Documents - 03/06/2017:

Consent Form Documentation - Scan on 3/8/2017 0000 by Scan, Onbase Inf : HEMODIALYSIS CATHETER, HEMODIALYSIS OR CRRT (below) Patient Name: Hemander, John Anthony



Date Of Birth 2/10/1983 MR# USN.

VERIFICATION OF INFORMED CONSENT TO SURGERY OR SPECIAL PROCEDURE

This abspiradracinty has personnel and facilities to assist your doctor or practitumer in performing surgicul operations and other diagnostic and therepositie procedures. To make sure that you fully understand the operation or procedure, your doctor or practitioner will fully explain the operation or procedure to you before you decide whether or not to give consent. If you have questions, you are encouraged and expected to ask them. This Inspitablicality has personnel and facilities to assist your doctor or practitumer in performing

 $1. \ Your \ doctor(s) \ or \ practitioner(s) \ have \ recommended \ the \ following \ operation(s) \ or \ procedure(s):$

PLACEMENT OF HEMO DIALYS CATHETETE

BUD THEM OPLANES OF CONTINUOUS MEAN REAGERMENT
THERE HEY

Name of doctor(s) or practitioner(s) who are performing your operation(s) or procedure(s):

This form is to insone us that you have been informed about the nature of your operation or

- You have the right to be informed by your doctor or practitioner of:
 The nature of the operation or procedure, including other care, treatment or medications;
 - Potential benefits, risks (must common and serious) or side offeets of the operation or
 procedure, including potential problems that might occur with ausstheria to be used and
 - during recuperation;

 - to the flexible of solioving treatment goule; Reasonable alternatives and the relevant risks, benefits and side effects related to such alternatives, including the possible results of not recovering care or treatment; All practitioners who will be performing important tasks related to the surgery.
- Except in cases of emergency, operations or procedures are not performed until you have had the
 opportunity to receive this information and have given your concent. You have the right to refuse
 any proposed operation or procedure any time before it is performed.
- 4. Your ductor or practitioner may be assisted by and/or designate responsibility to associates or assistants inclinding anesthesiologist, pathologists, and radiologists from the Medical Staff. Your doctor or practitioner and the persons in attendance for the purpose of performing specialized medical services such assertissis, adiology, or pathology are independent contractors, not employees or agents of the hospital/facility.

Revised 8/14/2013

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Adm: 3/6/2017, D/C:

Scans (continued)

Encounter-Level Documents - 03/06/2017: (continued)



VERIFICATION OF INFORMED CONSENT TO SURGERY OR SPECIAL PROCEDURE

Patient Name: Hernandez, John Authony Date Of Birth: 2/10/1983 MR4



- Equipment venders, representatives, and/or feebrucal assistants from the manufacturer of
 equipment to be used in your procedure may be present as an observer during your procedure
 when such presence is requested by your treating doctor or practitioner.
- 6. Photography ant/or video may be used as decated necessary during your operation or procedure.
- 7. By your signature below, you authorize the Pathologist or hospital/factivy to use their discretion in the disposition or use of any blond or dissues removed during the operation or procedure.

- Your signature on this form indicates that:
 You have read and understand the information provided in this form:
 - Your described and office and a decided by explained to you the operation or procedure and the anesthosia plan along with the risks, benefits, and alternatives, and the other information described above in this form;

 - You have had a chance to ask your doctor or practitioner questions;
 You have received all of the information you desire concerning the operation or procedure and the anosthesia:

ane <u>sthesia.</u>	ent to the performance of the aperat	nc3/1//Zinc H. 48
Signature ,	ationship ///www.com	10-27 41 Time 11. 78
Witness	DateTime _ a physiciantidey control or operator (years):	
INTERPRETER'S STATEM The contents of this form have	ENT been sight translated in	(language) to
the patient/logal Representative Interpreter Printed Name Date	Time Intest	yeter Signature/ID#
Interpreter/Service		
Revised 8/14/2013	2	LIKU MITUTAN DIA AUTAHI. Propis

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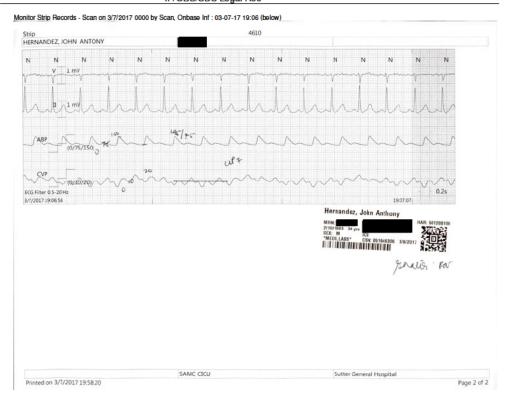
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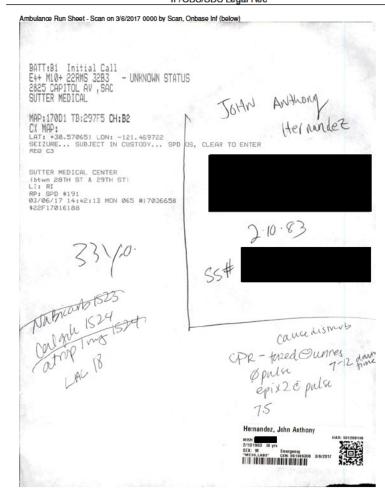
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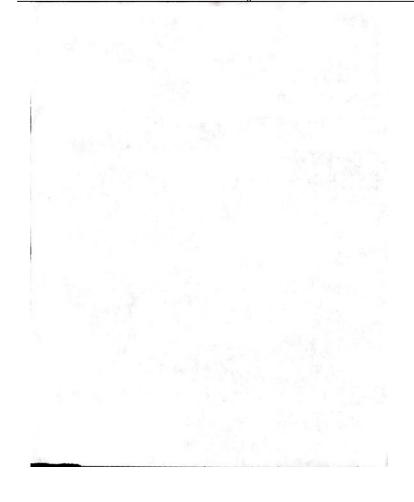
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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:





Parient Name: Elemandez, John Anthony Date Of Biren: 2/10/1983

and other health cure professionals, you help to make your health care us effective or possible. Please review the Patient's Rights & Responsibilities handout that has been prepared by the Hospital. It contains important information about your rights.

PATIENT'S PERSONAL PROPERTY: I understand that I should not keep valuables it my nom-PATIENT'S PERSONAL PROPERTY! I understand that I should not keep valuables it my norm and that I should either seed them home if possible or sak that they he placed in the I shoppinal's freproof safe. The Hospital's will not be responsible for, or liable to me for the loss of, or domage to, any money, jewelry, documents, or any other articles of unusual value and small size, unless they have been placed in the I toopital's safe at my request. The Hospital shall also not be responsible for or liable to me for the loss or damage of any other personal property, such as domiture, hearing aids, glasses, etc., unless stepostated with the I lospital of its article principal and that the Hospital should be loss of any personal property that is deposted with if for safekeeping is limited by conformal have to five hundred dottors (\$300) unless I obtain a written receipt for a greater amount from the Hospital. from the Hospital.

DIRECTORY INFORMATION: I understand that unless I object, information such as my name, room, family location, general condition (fair, cultural, stable, etc.) and religious affiliation may be disclosed to individuals who wint or all to inquise about mystay.

Object to Directory: Patient/Representative Initials.

MATERNITY PATIENTS ONLY: If I deliver an infant(s) while a patient in this Hospitol, I understand that these same Conditions of Admissions apply to the infant(s).

I have read the foregoing and I consent to treatment as described in the above Conditions of

Date	Time	Signature (Patient/Represe	intalive)
If signed	by other than par	ient, print came and relationship:	
Name (Pl	ease print)	Relationship	
Witnesses	s (required <u>only</u> f	or telephone consent, physical insbill	ty to sign, or signature by mark):
Date	Time —	Distance amondologia acinti	War-ace signature
_ Date _	Time	Witness name (please print)	Witness signature
If an inter	provided:	assistance with this form, please print	name and sign below:
Name (pl	case print)	Signature	

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SACRAMENTO POLICE DEPARTMENT

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SUTTER MEDICAL CENTER SACRAMENTO 2825 Capitol Ave Sacramento CA 95816 IP/OBS/SDS Legal Rec HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Adm: 3/6/2017, D





Patient Name: Hemandez, John Anthony Date Of Birth: 2/10/1983 MR# CSN: 83 (646)06

FINANCIAL AGREEMENT

Please review this Phannial Agreement carefully. This is a logal agreement that affects your rights. The Hospital provides advice and courseling for patients who request assistance in understanding their health care coverage and frauncut obligations for hospital services, including consyments and/or orinsurance, goverament health care program eligibility, charity care, and uninsured and prompt payment discount and installment programs. If you have questions regarding your financial obligation for hospital services, please request an appointment with a Patient Fanancial Services Counselor through the Hospital's admitting office.

HOSPITAL CHARGES. The Hospital's charges for vare and services are calculated in secondaries with its Charge Description Moster (*CDM*) in effect at the time services are provided. If you would like to review the CDM charges, please request in appointment with a Patient Financial Services Counselor. You can also view the Hospital's CDM on line at: www.nshpd.ca.gov

PHYSICIAN FEES: I understand that all physicians furnishing health care services to me, including but not limited to surgeous, radiologists, pathologists, anesthesiologists, hospitalists, energency room physicians and on call specialists, are independent contractors and are not employees of agents of the Hospital, and they will bill une separately for their survices. I also understand that the physician(s) who provide services to me at the Hospital may not contract with my health plan and a is not the Hospital's susponibility to determine if they do, and if I need that imformation I can obtain if from the physician or my health plan. I authorize payment of insurance benefits otherwise payable to me under any policy, plan or program directly to the Hospital based physicians for any health care services provided by them. If I have questions shoult which services are physician services and which are Hospital services, I can make an appointment to discuss my questions with a Patient Figancial Services Courselor.

SELF PAY: Lagree to pay all of the individual charges calculated in accordance with the Hospital's Charge Description Master (CDM), for the services and items provided to me, less the Hospital's uninsured discount and, if applicable, a prompt pay discount, unless I qualify for charity care under the Fospital's Tunnerial Assistance Policy. Londerstand has the individual charges for the services and items provided by the Hospital are reflected in the Hospital's current CDM, which is available for my pro-less in the Brospital are reflected in the Hospital's current CDM, which is available for my pro-less in the Brospital maintains a Financial Assistance policy and that, depending on my funancial customate the Hospital maintains a Financial Services Courselon are usualled to only in the Brospital and the Hospital maintain care may be reduced or continued and whether I qualify for government health care programs, charity care, and uninsured and prompt pay discounts; asswer any questions I may have about this financial agreement; estimate my financial essonishility for the Hospital's services; and establish a reasonable payment plan should I desire one. I understand that, if permitted by law, delinquent accounts shall be an interest at the legal rate.

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SACRAMENTO POLICE DEPARTMENT

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:





Patient Name: Hemandez, John Anthony Date Of Birth: 2/10/1981 MR#

MR# CSN: 85(646306

MANAGED CARE (HMO) AND PREPERRED PROVIDER ORGANIZATION (PPO) HEALTH PLANS: The Bospital maintain: a list of health plans with which it contracts. A list of such plans is available upon request from a Patient Financial Services Counselor.

- If the Hospital currently has a contract with my HMO or PPO health plan, I understand that I am responsible to pay directly to the Hospital any deductible, co-payment or cost share as determined by my health plan policy as well as all charges for services and iteras that are not covered by my health plan policy terms. I understand that I may be eligible for a discount for services and iteras that are not covered by my health plan policy terms under the Hospital's Financial Assistance policy. Nothing inthis agreement shall preduce the Hospital's reimburscanent from other responsible third partices-including, but not limited to be health plane, auto and liability insoners, third party administrators, or government leadlife are programs—for any amounts that may be due from their up to the statal of all of the Hospital's CDM.
- If the Hospitoi does not have a contract with my HMO or PPO health plan. I agree to pay all of the Brispital's charges calculated in accordance with the hospital's CDM, for the services and items provided to me without reduction or discount, unless the services and items provided are not covered by my health plan, in white case I may be cligible for a discount under the Hospital's Hirancial Assistance policy. As a courtesy, the Hospital will first bill my health plan. If if the health plan does not pay all of the Hospital's sharger without reduction or discount, I agree to pay the unpaid halance (except for any unpaid belances owed for emergency services covered by my health plan). I agree to increaseably assign my rights against the health plan to the Hospital of requested, and I agree to coperate with the Brispital in its efforts in collect from my health plan. I understand that, if permitted by law, delinquent accounts shall be as interest of the ineal state.

INDEMNITY AND OTHER INSURANCE: I direct my insurance to pay directly to the Hospital all insurance benefits otherwise payable to me for the services and items provided to me, without reduction or discount. If my insurance does not pay all of the Hospital's charges calculated in accordance with the Hospital's CDM, for the services and items provided to me, I agree to pay the unpaid balance. If my insurance falls to pay any amount, I understand that I may be required to pay the bill in full. I understand that if permitted by law, definquent accounts shall bear interest at the legal rate.

MEDICAREMEDICAID/MEDI-CAL: The Hospital is a Medicate and Medi-Cal provider. I understand that I am responsible to pay directly to the Hospital any cost share or co-payment due from me under these programs, as well as any charges for treatment or services not covered by these programs that I have requested and agreed, in advance, to be provided.

BENEFITS REVIEW: The Hospital provides advice and counseling for patients who request assistance in understanding insurance, government heathcare eligibility charry care, uninsured and prompt payment discounts, and installment programs. Please request an appointment with a Patient Standard at

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HERNANDEZ, JOHN ANTHONY MRN:

DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:





Patient Name: Hemandez, John Anthony Date Of Birtis: 2/10/1983 MRE CSN



CONDITIONS OF ADMISSION AND/OR REGISTRATION

Please review these Conditions of Admission/Registration excelully. This is a legal agreement that affects your rights and provides important information about Sutter Medical Center, Sacramente (Hereafter "Hespital").

CONSENT TO TREATMENT: I consent to the performance of all routine baspital and medical care and treatment including, but not limited to, emergency treatment or procedures, laboratory and radiological tests and procedures, supportive and rehabilitative therapies, medication administration and/or other hospital services that may be provided or performed under the general and special instructions of my physician, suggests and/or other authorized healthcare provider(s). I understand that my care and treatment may involve the taking of photographs using various imaging technologies to assist in my diagnosis or treatment, or as meassary for the bringhal's operations, including healthcare quality and patient safety programs.

NOTICE OF CLINICAL TRAINING: Junderstand that the Hospital may participate in advanced teaching programs through which physician residents, follows, medical students, students nurses, audior students in other health cure fields receive in-hospital training and experience as part of their education. Whenever a participant in any of these programs takes part in mythe patient's case, he/she will do so unly under the direct supervision of ha/her assigned faculty or other licensed clinical professional. Physician residents may assist in surgery only under the immediate supervision of a staff physician.

NOTICE OF BLECTRONIC INTENSIVE CARE UNIT (EICU): The Hospital may utilize e technologies to communicate between health care providers and monitor patients receiving care in the Intensive Care Unit.

LEGAL RELATIONSHIP BETWEEN HOSPITAL AND PHYSICIANS: I understand that all LEGAL RELATIONSHIP BETWEEN HONDITAL AND PHYSICIANS: Lunderstand that all physicians providing health core services to melde patients, including but not initiate to, radiologists, pathologists, anesthesiologists, hospitalists, surgeons, emergencyphysicians and out-call specialists are inalepondout contracted and are not employeed or egents of the literistant Number and that I arrithe patient is under the care and supervision of mythe patient's attending physician, and it is the responsibility of hospital staff to earry out his/her instructions. Lunderstand that it is the responsibility of mythe patient's physician, surgeon or other authorized healthcare provider to obtain my informed consent for surgical or complex medical treatment, special diagnostic or therapeutic procedures, investigational treatment or procedures, and/or other specialistic flooring law results.

PATIENT RIGHTS & RESPONSIBILITIES: The Hospital is committed to treating every patient with respect, diguity, and concern. We consider you a partner in your hospital care. When you are well-informed, participate in treatment decisions, and communicate openly with your doctor

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Parties Name: Hernandez, John Anthony
Date Of Bittli: 2/10/1983
MR#
CSN: 851646300

Financial Services Counselor If you need assistance in understanding your financial obligations for hospital services.

NOTICE THAT THE HOSPITAL VERIFIES FINANCIAL INFORMATION: The Hospital may use outside agencies that verify the information I have provided, including my income and credit information. The Hospital uses this information to assist it with identifying pecential answers of payment for my beathtrane services, obtaining payment for headiteare services, and assessing my eligibility for Financial Assistance.

AMENDMENTS TO THE CONDITIONS OF ADMISSION/REGISTRATION AND FINANCIAL AGREEMENT: To be valid and enforceable, any amendment or medification to this agreement must be approved in writing by me and an authorized agent of the Hospital.

AUTHORIZATION: I have read the information noted above and have been given the exportantly to have my questions answered fully and to my subfaction, and have been offered a copy of this agreement.

Date	Tirne —	Of Madle to Signature (Patient/Representable)
If signed by o	other than patient, print	name and relationship:
Name		Relationship
Witnesses fro Date	quired only for telephone 1537	and concent abusical inshills assist or signature by mark:
Dac	Time Wit	iness name (please (Ant) Witness signature
If an interpre	ter provided assistance	with this form, please print name and sign below:
Date	Name (please p	nint) Signature

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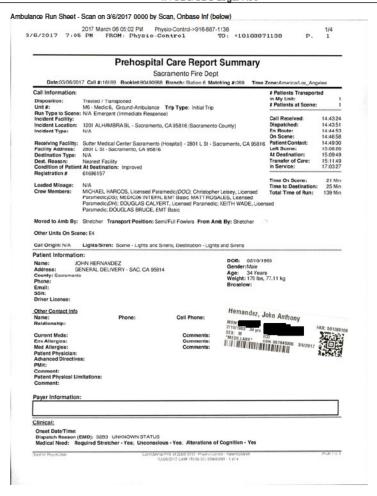
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Adm: 3/6/2017, D/C:

#POB3/SUS Legal Nec 2017 Match 06 05 02 PM Physio-Cortrol-916-887-1138 P. 2/4 3/6/2017 7:05 PM FRON: Physio-Control TO: +19188871138 P. 2

Chief Compiaint (Primary): APNEICPULSELESS Duration: Provider Impression: Cardiac Arrest Mechanism of Injury: Protocol 1: Cardiac Arrest-Adult FlowChart: Time Employee 14:49:00 INTERN, MEDICO6 Pulse: 9
Resp: 4
Resp: 4
Raspow Coma Score: E (1) + V (1) + M (1) = 3 - Adult
ABC Breathing: Net Normal, Apnaio Circulation: Net Normal Skin Coler: Cyanotic, Falle Pertinent Knegativns: Breathing: Lung Sounds: Lett: Clear Lung Sounds: Right: Clear Skin Temperature: Normal Skin Condition: Normal Neurological Mental Status: Unresponsive - Normal for Pt: Ne AVPU: Uncorectous 14:49:00 INTERN, MEDIC06 Neurological: All Neuro Abnormal Treatment: ALS Assessment 14:49:00 INTERN, MEDIC06 14:49:00 ROSALES, MAT Level: ALS2 Treatment: Oropharyngeal Airway Insert 14:50:00 CALVERT, DOUGLAS Level: BLS Treatment: EKG Monitoring Success: N/A Level: ALS1 INTERN, MEDICO6 Comments: FEA
Treatment: Bag-Valve-Mask
Success: N/A Success: ru-Level:BLS Medication - Oxygen Dose:15 Unit: LPM Route: Inhalation Success: N/A 14:50:00 CALVERT, DOUGLAS Level:BLS Treatment: Orotracheal Intubation 14:52:00 Success: No.
Mallampati - Mallampati Indications for Invasive Alrway: Aonea or agonal respirations
Level: N/A
Treatment: IV Start 14:53:00 Leisey, Christopher Success: Yes
IV Fluid Type: Normal Saline IV Size: 18 ga IV Site: Antecubital-Left IV Total Fluid: 500 Level: ALS1 Treatment: Orotracheal Intubation 14.54:00 INTERN, MEDICO6 Success: N/A
Level: N/A
Medication - Epinephrine 1:19,000
Medication - Epinephrine 1:19,000 14:54:00 Dose: Unit: mg Route: Intravenous Su Level: ALS1 Treatment: Orotracheal Intubation Hernandez, John Anthony *MEDS LABS* CSN: 851646396

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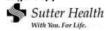
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Secondary Documentation: Secondary Documentation Signature: No Comment:	
Auth Signature: No Privacy Sig: No Unableto Sign: Yes Refuse	ed to Sign: No
Signature Image(s):	
Authorization Signature	Privacy Notice Signature
Receiving RN / MD Signature - RN - 2017-03-06 15:45:09	Technician Sgnature - HARCOS - 2017-03-06 15:52:41
This signature only acknowledges transfer of parient care from Sacramento Fire Department to the above named facility per 42CFR 489.24 and is not a statement of	A STATE OF THE PARTY OF THE PAR
review and agreement with the contents of the Patient Care Report.	111-
16 25	10
(m)	
Recommended Service Level: / Dispatch Service Level: N/A	
Agency Definable Field 1: Agency Definable Field 2: General Commests: N/A	
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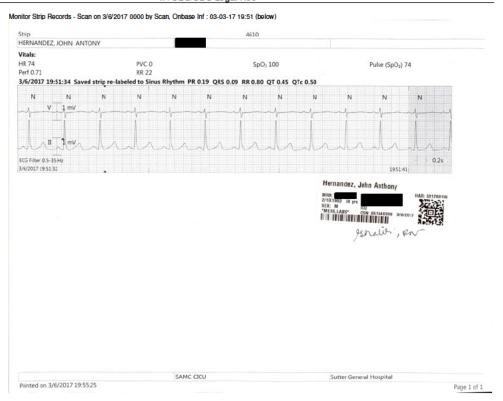
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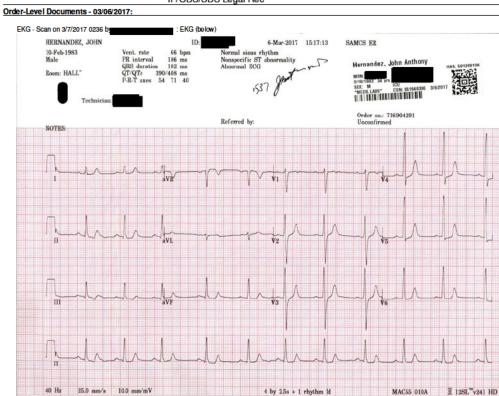
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Cardiology Scans

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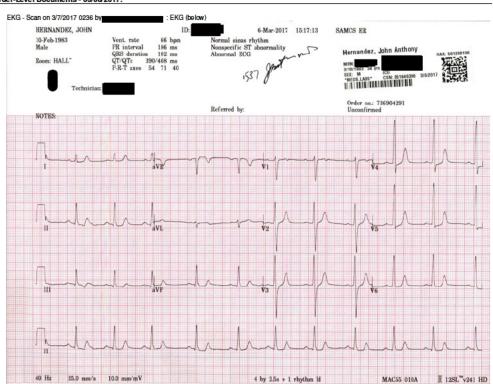
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Adm: 3/6/2017, D/C:

Encounter-Level Documents:

Order-Level Documents - 03/06/2017:



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DOB: 2/10/1983, Sex: Adm: 3/6/2017, D/C:

Call Documentation

MD at 03/08/17 0812
Status: Signed



PULMONARY MEDICINE CRITICAL CARE PROGRESS NOTE

Admit Date: 3/6/2017

Patient ID:

John Anthony Hernandez is a 34-year-old male with unknown past history who apparently was behaving belligerently and combative in the field. The patient was approached by police officers who were required to use a Taser to subdued him and upon being tasered, the patient developed an acute cardiac arrest. The patient underwent CPR in the field receiving epinephrine and was Intubated prior on arrival by EMS. The patient was brought to the Emergency Room where he went into PEA, required some additional CPR with return of a blood pressure. He is now admitted to the Intensive Care Unit intubated and sedated. Toxicology screen was positive for methamphetamines.



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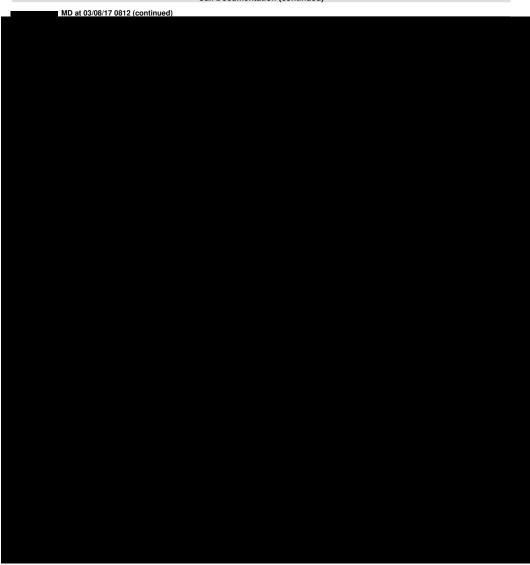
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Call Documentation (continued)



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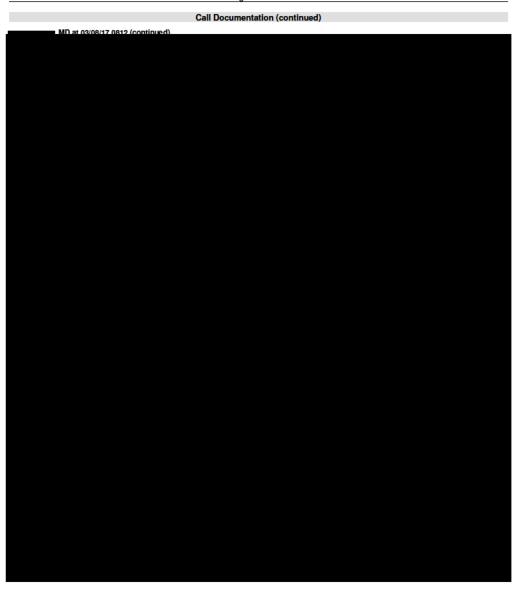
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Call Documentation (continued)



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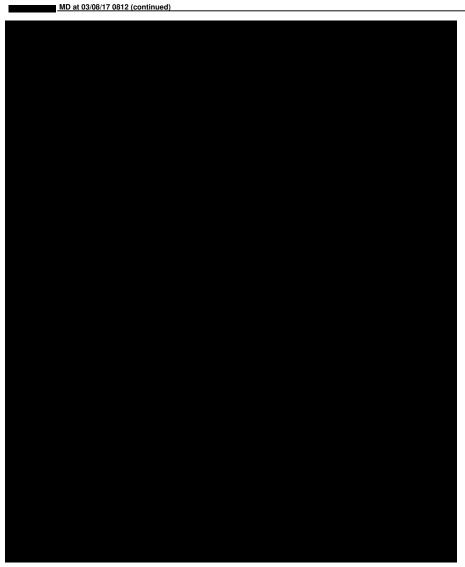
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Adm: 3/6/2017, D/C:

Call Documentation (continued)



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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Call Documentation (continued)

MD at 03/08/17 0812 (continued)

IMAGING:

Xr Chest Portable

Result Date: 3/7/2017

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male PROCEDURE: XR CHEST PORTABLE, 3/7/2017 11:29 AM ACCESSION NUMBER(S): MCD17000612385 LOCATION: SAMC CLINICAL INDICATION: Post-Procedure. COMPARISON: 3/6/2017 TECHNIQUE: Portable semi-upright frontal examination of the chest. Exam is limited by material external to the patient, possibly a heating blanket. FINDINGS: Heart and Mediastinum: The heart is normal in size. The mediastinum is normal. The aorta is normal. Tubes and Lines: Endotracheal tube is seen with its tip approximately 4.4 cm above the carina. Nasogastric tube has its tip in the stomach. Left subclavian vein triple-lumen catheter has its tip in the low SVC. Lungs: The lungs are clear. There is no pleural effusion or pneumothorax. Osseous Structures/Other: Osseous structures are unremarkable.

IMPRESSION: Life-support hardware is in satisfactory position. No pneumothorax. Limited exam, as above. Electronically Signed by Management, MD, Sutter Medical Group 3/7/2017 12:24 PM

MD

Pulmonary Medicine, Infectious Diseases and Critical Care

MD at 03/07/17 0808

PULMONARY MEDICINE CRITICAL CARE PROGRESS NOTE

Admit Date: 3/6/2017

Patient ID:

John Anthony Hernandez is a 34-year-old male with unknown past history who apparently was behaving belligerently and combative in the field. The patient was approached by police officers who were required to use a Taser to subdued him and upon being tasered, the patient developed an acute cardiac arrest. The patient underwent CPR in the field receiving epinephrine and was Intubated prior on arrival by EMS. The patient was brought to the Emergency Room where he went into PEA, required some additional CPR with return of a blood pressure. He is now admitted to the Intensive Care Unit intubated and sedated. Toxicology screen was positive for methamphetamines.

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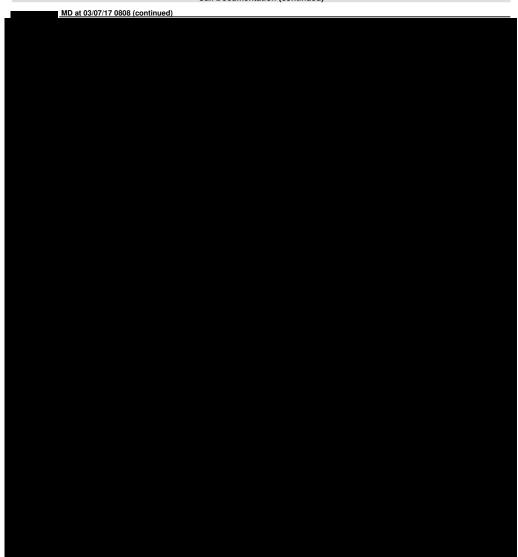
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Call Documentation (continued)



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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Call Documentation (continued) MD at 03/07/17 0808 (continued) Printed by at 3/8/17 12:17 PM

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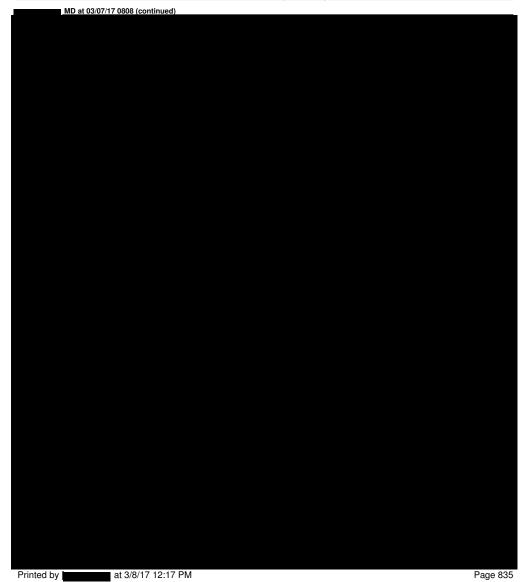
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Call Documentation (continued)



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Call Documentation (continued) MD at 03/07/17 0808 (continued) Printed by at 3/8/17 12:17 PM Page 836

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HERNANDEZ, JOHN ANTHONY MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Call Documentation (continued) MD at 03/07/17 0808 (continued)

IMAGING:

Ct Cervical Spine Wo Contrast

Result Date: 3/6/2017

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male PROCEDURE: CT CERVICAL SPINE WO CONTRAST, 3/6/2017 4:01 PM ACCESSION COMPARISON: NUMBER(S): MCC17000604478 LOCATION: SAMC CLINICAL INDICATION: Injury. None TECHNIQUE: Helical non-contrast CT images were obtained through the cervical spine with 2 mm sagittal and coronal reformats. FINDINGS: Osseous /disc structures: Normal bony alignment without fracture or dislocation. Vertebral body height well-maintained. Disc space height well-maintained. Soft tissues: Mild patchy infiltrate in the medial right upper lung field. Patient is intubated. C2-3: No bony canal or foraminal C3-4: No bony canal or foraminal narrowing. C4-5: No bony canal or foraminal narrowing. C5-6: Mild dorsal disc bulge without significant bony canal or foraminal narrowing. C6-7: No bony canal or C7-T1: No bony canal or foraminal narrowing. foraminal narrowing.

IMPRESSION: No acute fracture or subluxation in the cervical spine.
Total exam Dose Length Product for a 580 mGy-cm Total exam CT Dose Index 22.1 mGy Electronically Signed by Medical Group 3/6/2017 4:41 PM

Ct Brain Wo Contrast

Result Date: 3/6/2017

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983
GENDER: Male PROCEDURE: CT BRAIN WO CONTRAST, 3/6/2017 4:01 PM ACCESSION NUMBER(S):
MCC17000603841 LOCATION: SAMC CLINICAL INDICATION: ALOC. COMPARISON: None TECHNIQUE: Axial non-contrast CT images were obtained from the skull base to the vertex at 5 mm slice thickness in brain and bone algorithm. FINDINGS: Brain: Ventricles and sulci appropriate for age. No midline shift, acute intracranial hemorrhage, or hydrocephalus. Probable small arachnoid cyst in the posterior aspect of

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Call Documentation (continued)

MD at 03/07/17 0808 (continued)

the posterior fossa. Orbits: Visualized portions are within normal limits. Sinuses and otomastoids: No mucosal thickening or air-fluid levels. Calvarium: Unremarkable. Visualized soft tissues: Unremarkable.

IMPRESSION: No acute intracranial process. Total exam Dose Length Product for a 671 mGy-cm Total exam CT Dose Index 38.3 mGy Electronically Signed by Med, Sutter Medical Group 3/6/2017 4:35 PM

Xr Chest Portable

Result Date: 3/6/2017

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male PROCEDURE: XR CHEST PORTABLE, 3/6/2017 5:02 PM ACCESSION NUMBER(S): MCD17000605811 LOCATION: SAMC COMPARISON: 3/6/2016 at 3:45 PM CLINICAL INDICATION: ET Tube. Line placement. TECHNIQUE: Portable AP view of the chest. FINDINGS: ET tube remains in place with distal tip positioned approximately 3 cm above the carina. There has been interval placement of a nasogastric tube, with distal end extending into the left upper quadrant of the abdomen, although distal tip is excluded from the field-of-view. Lungs are bilaterally well expanded. No confluent areas of lung consolidation or pleural effusions. Heart and mediastinal structures appear stable. There is persistent prominence of the central pulmonary vasculature noted bilaterally, right greater than left.

IMPRESSION: 1. Interval placement of nasogastric tube. ET tube remains in satisfactory position. 2. Persistent prominent central pulmonary vascular congestion, right greater than left, without significant interval change. Cannot exclude underlying adenopathy. Electronically Signed by MD, Sutter Medical Group 3/6/2017 5:54 PM

Xr Chest Portable

Result Date: 3/6/2017

PATIENT: JOHN ANTHONY HERNANDEZ MRN: AGE: 34 years DOB: 2/10/1983 GENDER: Male PROCEDURE: XR CHEST PORTABLE, 3/6/2017 3:28 PM ACCESSION NUMBER(S): MCD17000603785 LOCATION: SAMC CLINICAL INDICATION: Chest Pain. COMPARISON: None TECHNIQUE: Single AP view of the chest. FINDINGS: Mediastinum and hila: Hila appear mildly prominent. Lines and tubes: Endotracheal tube tip 3.5 cm above the carina. Lungs and pleura: Mild pulmonary vascular congestion with very mild interstitial prominence. No definite focal consolidation, pneumothorax or pleural effusion. Bones and soft tissues: The osseous structures are unremarkable.

IMPRESSION: Mild pulmonary vascular congestion with mild interstitial prominence may represent mild interstitial pulmonary edema. Mild prominence the hila may simply represent prominence of the central pulmonary arteries however underlying adenopathy is not excluded. When patient is able recommend dedicated PA and lateral views of the chest to better evaluation. Electronically Signed by MD Sutter Medical Group 3/6/2017 4:10 PM

ME

Pulmonary Medicine, Infectious Diseases and Critical Care

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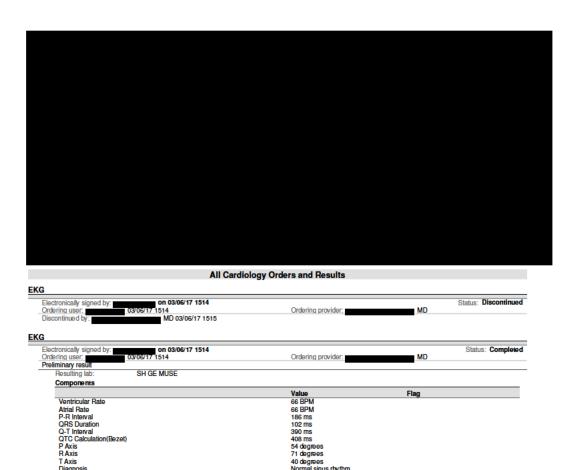
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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Call Documentation (continued)

MD at 03/07/17 0808 (continued)



66 BPM 186 ms 102 ms 390 ms 408 ms 54 degrees 71 degrees 40 degrees Normal sinus rhythm Nonspecific ST abnormality Abnormal ECG No previous ECGs available

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Diagnosis Diagnosis Diagnosis Diagnosis

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

	IP/OBS/SDS Legal	Rec		
	All Cardiology Orders	and Results (continued)		
EKG (continued)	All Cardiology Orders	and nesuns (continued)		
Preliminary result	SH GE MUSE			
Resulting lab:	SH GE MUSE			
Components				
		Value	Flag	
Ventricular Rate Atrial Rate		66 BPM 66 BPM		
P-R Interval		186 ms		
QRS Duration		102 ms		
Q-T Interval		390 ms		
QTC Calculation(Bezet)		408 ms		
P Axis R Axis		54 degrees 71 degrees		
T Axis		40 degrees		
Diagnosis		Normal sinus rhythm		
Diagnosis		Nonspecific ST abnormality		
Diagnosis		Abnormal ECG		
Diagnosis		No previous ECGs available		
Preliminary result	OU OF MUSE			
Resulting lab:	SH GE MUSE			
Components				
		Value	Flag	
Ventricular Rate		66 BPM		
Atrial Rate		66 BPM		
P-R Interval QRS Duration		186 ms 102 ms		
Q-T Interval		390 ms		
QTC Calculation(Bezet)		408 ms		
P Axis		54 degrees		
R Axis		71 degrees		
TAxis		40 degrees		
Diagnosis Diagnosis		Normal sinus rhythm Nonspecific ST abnormality		
Diagnosis		Abnormal ECG		
Diagnosis		No previous ECGs available		
Final result	OIL OF MIDE			
Resulting lab:	SH GE MUSE			
Components				
		Value	Flag	
Ventricular Rate		66 BPM		
Atrial Rate P-R Interval		66 BPM 186 ms		
QRS Duration		102 ms		
Q-T Interval		390 ms		
QTC Calculation(Bezet)		408 ms		
P Axis		54 degrees		
R Axis		71 degrees		
TAxis		40 degrees		
Diagnosis Diagnosis		Normal sinus rhythm Nonspecific ST abnormality		
Diagnosis		Abnormal ECG		
Diagnosis		No previous ECGs available		
		•		
KG Electronically signed by:	MD on 03/06/17 1515			Status: Complete
Ordering user:	MD 03/06/17 1515	Ordering provider:	MD	Cianos. Complete
Electronically signed by:	MD on 03/06/17 1515			Status: Complete
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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

continued)			
rdering user:	MD 03/06/17 1515	Ordering provider:	MD
eliminary result			
Resulting lab:	SH GE MUSE		
Components			
		Value	Flag
Ventricular Rate		99 BPM	
Atrial Rate P-R Interval		99 BPM 138 ms	
QRS Duration		114 ms	
Q-T Interval		404 ms	
QTC Calculation(Bezet)		518 ms	
P Axis		59 degrees	
R Axis		63 degrees	
T Axis Diagnosis		36 degrees Normal sinus rhythm	
Diagnosis		Prolonged QT	
Diagnosis		Abnormal ECG	
Diagnosis		No previous ECGs available	
reliminary result	01105111105		
Resulting lab:	SH GE MUSE		
Components		Value	Flag
Ventricular Rate		99 BPM	riay
Atrial Rate		99 BPM	
P-R Interval		138 ms	
QRS Duration		114 ms	
Q-T Interval		404 ms	
QTC Calculation(Bezet)		518 ms	
P Axis R Axis		59 degrees 63 degrees	
T Axis		36 degrees	
Diagnosis		Normal sinus rhythm	
Diagnosis		Prolonged QT	
Diagnosis		Abnormal ECG	
Diagnosis		No previous ECGs available	
reliminary result			
Resulting lab:	SH GE MUSE		
Components			
Ventricular Rate		Value 99 BPM	Flag
Ventricular Hate Atrial Rate		99 BPM 99 BPM	
P-R Interval		138 ms	
QRS Duration		114 ms	
Q-T Interval		404 ms	
QTC Calculation(Bezet)		518 ms	
P Axis R Axis		59 degrees	
H AXIS T Axis		63 degrees 36 degrees	
Diagnosis		Normal sinus rhythm	
Diagnosis		Prolonged QT	
Diagnosis		Abnormal ECG	
Diagnosis		When compared with ECG of 06- MAR-2017 15:17, (unconfirmed)	
Diagnosis Diagnosis		Vent. rate has increased BY 33 BPM	
Diagnosis Diagnosis		ST no longer depressed in Inferior leads ST elevation has replaced ST	
Diagnosis		depression in Anterior leads QT has lengthened	
Diagnosis		Q1 nas lengmened	

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

All Cardiology Orders and Results (continued)

ontinued)				
Resulting lab:	SH GE MUSE			
Components				
		Value	Flag	
Ventricular Rate Atrial Rate		99 BPM 99 BPM		
P-R Interval		138 ms		
QRS Duration Q-T Interval		114 ms 404 ms		
OTO Calculation(Bezet) P Axis R Axis T Axis Diagnosis Diagnosis Diagnosis		518 ms 59 degrees 63 degrees 63 degrees Normal sinus rhythm Prolonged QT Abnormal J wave (Osbo seen, consider hypother hypercalcomia, intracran abnormalifies in different	mia, iial	
Diagnosis Diagnosis		Abnormal ECG When compared with EC MAR-2017 15:17, (unco	CG of 06-	
Diagnosis Diagnosis		Vent. rate has increased ST no longer depressed leads	BY 33 BPM	
Diagnosis Diagnosis		QT has lengthened J waves seen		

Multi-Disciplinary Problems (from)

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roblem: Patient Care Overview (Price	ority: –)			(Start Date: 03/	06/17) (Resolve
Goal	Priority	Disciplines	Start Date	Expected End Date	End Date
Plan of Care Review		Interdisciplinary	03/06/17		
Goal	Priority	Disciplines	Start Date	Expected End Date	End Date
Individualization and Mutuality		Interdisciplinary, Nursing	03/06/17	-	-
Goal	Priority	Disciplines	Start Date	Expected End Date	End Date
Discharge Needs Assessment		Interdisciplinary	03/06/17	-	
roblem: Fall Risk (Adult) (Priority: -	-)			(Start Date: 03/	06/17) (Resolve
Goal	Priority	Disciplines	Start Date	Expected End Date	End Date
		Interdisciplinary	03/06/17		
Identify Related Risk Factors and Signs and Symptoms		, , ,			-
		, , ,		onse Clinical Practice Guidel	ine (CPG)
Signs and Symptoms Goal Details: Related risk factors a Goal		toms are identified upon ini	tiation of Human Resp	onse Clinical Practice Guidel Expected End Date	ine (CPG)
Signs and Symptoms Goal Details: Related risk factors	and signs and sympi	toms are identified upon ini Disciplines Interdisciplinary	tiation of Human Resp Start Date 03/06/17		
Signs and Symptoms Goal Details: Related risk factors a Goal Absence of Falls	and signs and sympi	toms are identified upon ini Disciplines Interdisciplinary	tiation of Human Resp Start Date 03/06/17		
Signs and Symptoms Goal Details: Related risk factors a Goal Absence of Falls Goal Details: Patient will demonst Prob Intervention Monitor/Assist with Self Care	Priority	loms are identified upon ini Disciplines Interdisciplinary comes by discharge/transiti Disciplines Interdisciplinary	Start Date 03/06/17 on of care. Start Date 03/06/17		End Date
Signs and Symptoms Goal Details: Related risk factors a Goal Absence of Falls Goal Details: Patient will demonste Prob Intervention Monitor/Assist with Self Care Intervention Details: Provide a saf Keep care area uncluttered	Priority	toms are identified upon ini Disciplines Interdisciplinary comes by discharge/transiti Disciplines Interdisciplinary nment that encourages ind	Start Date 03/06/17 on of care. Start Date 03/06/17		End Date
Signs and Symptoms Goal Details: Related risk factors a Goal Absence of Falls Goal Details: Patient will demonst Prob Intervention Monitor/Assist with Self Care Intervention Details: Provide a saf Keep care area uncluttered Keep needed items within reach (e Promote use of personal vision/aux	Priority	toms are identified upon ini Disciplines Interdisciplinary tomes by discharge/transiti Disciplines Interdisciplinary onment that encourages indust all items) sses, hearing aids)	Start Date 03/06/17 on of care. Start Date 03/06/17		End Date
Signs and Symptoms Goal Details: Related risk factors a Goal Absence of Falls Goal Details: Patient will demonst Prob Intervention Monitor/Assist with Self Care Intervention Details: Provide a saf Keep care area unclut	Priority	toms are identified upon ini Disciplines Interdisciplinary tomes by discharge/transiti Disciplines Interdisciplinary I	Start Date 03/06/17 on of care. Start Date 03/06/17 ependent activity	Expected End Date	End Date
Signs and Symptoms Goal Details: Related risk factors a Goal Absence of Falls Goal Details: Patient will demonst Prob Intervention Monitor/Assist with Self Care Intervention Details: Provide a saf Keep care area uncluttered Keep needed items within reach (e Promote use of personal vision/au Assess assistance level required it	Priority	toms are identified upon ini Disciplines Interdisciplinary tomes by discharge/transiti Disciplines Interdisciplinary I	Start Date 03/06/17 on of care. Start Date 03/06/17 ependent activity	Expected End Date	End Date

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HERNANDEZ, JOHN ANTHONY MRN:

DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Multi-Disciplinary Problems (continued) (from)

Determine need for increased observation, or bed'chair alarms
Assess equipment fernironmental modification needs (e.g., low bed, signage, nonskid footwear)
Define behavior and activity limits to patient/family
Perform regular intentional rounding to assess need for position change, pain assessment, personal needs

Prob Intervention Frequency Disciplines Start Date End Date

Review Medications/Identify Per CPG Interdisciplinary 03/06/17 --
Contributors to Fall Risk
Intervention Details: Regularly review medication contribution to fall risk
Consider risk related to polypharmacy and age
Balance adequate pain management with potential for oversedation
Schedule medication administration times to minimize fall risk (e.g., avoid diuretics in pm)

High-risk medications related to falls include; narcotics, sedatives, diuretics, laxatives, hypnotic agents, insulin/oral hypoglycemics, regional blocks, recent anesthesia/sedation and cardiovascular drugs End Date

Problem: Pressure Ulcer Risk (Braden Scale) (Adult, Obstetrics, Pediatric) (Priority: -) (Start Date: 03/06/17) (Resolve Date: --) Goal Identify Related Risk Factors and Start Date

Signs and Symptoms Goal Details: Related risk factors and signs and symptoms are identified upon initiation of Human Response Clinical Practice Guideline (CPG)

Goal Priority Disciplines Start I Skin Inlegrity - Interdisciplinary 03/06/ Goal Details: Patient will demonstrate the desired outcomes by discharge/transition of care Expected End Date

Disciplines Interdisciplinary Frequency Per CPG End Date Proo inservention
Promote/Optimize Nutrition Per CPG Intervention Details: Optimize nutritional intake
Avoid unnecessary restrictions
Monitor appetite, intake, tolerance/intolerance
Monitor fluid and electrolyte balance and bowel elimination pattern
Provide supportive environment and rest periods as needed
Provides/encourage oral care 03/06/17

Prob Intervention Frequency Disciplines Start Date End Date
Prevent/Manage Excess Moisture Por CPG Interdisciplinary 03/06/17 -Intervention Details: Keep all areas of skin (especially folds) clean and dry
Cleanse skin gently at solling with pH-balanced cleanser
Maintain adequate skin hydration. ée.g., pH-balanced lubricating moisturizers, minimal alcohol content, emollient lotion)
Apply topical skin moisture barrier (e.g., lith-forming skin protectant, creams)
Minimize incontinence soiling/moisture (e.g., establish toileting schedule, utilize moisture-wicking pad/underpads or incontinence collection device)

Prob Intervention

Maintain Head of Bed Elevation **End Date** Maintain Head of Bed Elev Less Than 30 degrees as

Tolerated intervention Details; maintain head of bed at lowest degree of elevation tolerated considering medical condition/other restrictions

limit amount of time head of bed elevated greater than 30 degrees

Frequency Per CPG End Date Prob Intervention Prob Intervention Frequency Disciplines Start Date
Prevent/Minimize Sheet/Friction Per CPG Interdisciplinary 03/06/17
Injuries Intervention Details: Protect bony prominences by utilizing pressure-redistribution devices, limb padding Use aids (e.g., slide boards, mechanical lift) during transfer
Avoiding massage over reddened areas/bony prominences
Float heels off bed
Keep skin free from extended contact with medical devices (e.g., tubing, bedpan)

 Prob Intervention
 Frequency
 Disciplines

 Turn/Reposition Often
 Per CPG
 Interdisciplina

 Intervention Details: Avoid positioning onto an area that remains reddened
 End Date

Limit time chair sitting time (do not exceed two hours)

Encourage weight shift while upright every 15 minutes/clinician reposition if unable to complete independently

Allow one hour interval between sitting sessions

Use an active support surface when frequent repositioning isn't possible

Note: with a pressure management surface turning/positioning frequency may be extended up to a maximum of four hours based on patient condition

Problem: Mechanical Ventilation, Invasive (Adult) (Priority: --)

(Start Date: 03/06/17) (Resolve Date: --)

Problem Details: Prevent and manage potential problems including:1. artificial airway induced skin/tissue breakdown2. gastritis/stress ulcer3. immobility4 inability to wean5. malnutrition6. mechanical dysfunction7. situational response8. ventilator- induced lung injury

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Start Date

Start Date 03/06/17

03/06/17

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Expected End Date End Date

End Date

End Date

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MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Multi-Disciplinary Problems (continued) (from)

Signs and Symptoms of Listed Potential Problems Will be Absent

or Manageable (Mechanical Ventilation, Invasive)

Details: Signs and symptoms of listed potential problems will be absent or manageable by discharge/transition of care (reference Mechanical lation, Invasive (Adult) CPG).

Interdisciplinary

Disciplines Interdisciplinary

Prob Intervention Frequency Discipline
Provent Airway Per CPG Interdiscipl
Displacement/Mechanical
Dysfunction
Intervention Details: Secure airway in place with device/ties/tape
Prevent patient/equipment weight from pulling on tube
Perform regular culf pressure maintenance
Provide adequate humidification
Promote patient-ventilator synchrony
Keep emergency equipment appropriate for size/age readily accessible
Monitor/maintain alarm settings/parameters

Disciplines Interdisciplinary Prob Intervention Start Date Prob Intervention Prequency Disciplines Start I
Prevent Airway-Related Per CPG Interdisciplinary 03/06/
Skin/Tissue Breakdown
Intervention Details: Minimize pressure points/ tube manipulation/activity
Avoid traction on airway device, take care with repositioning
Ensure insertion site receives regular hygiene care and securement device/ties are changed
Maintain minimal occluding volume cuff pressure
Potate/re secure or at two regulars.

Rotate/re-secure oral tube routinely

Avoid excessive moisture/pooling secretions
New tracheostomy track requires 5 to 10 days after placement to mature-avoid early tube change

Prob Intervention
Prevent Ventilator-induced Lung Disciplines Interdisciplinary End Date

Injury Interve

Injury
Injury
Injury
Inletvention Details: Regularly assess spontaneous breathing trial/extubation readiness
Consider/adjust mode selection to achieve patient/ventilator synchrony
Monitor/limit ventilator tidal volumes
Monitor/limit ventilator pressures
Closely monitor fluid balance for signs of overload
Consider blood product transfusion volume/potential inflammatory effect
Consider blood product transfusion volume/potential inflammatory effect
Consider lose of permissive hypercapnia

Start Date Disciplines Interdisciplinary End Date Promote/Provide Early Rehabilitation Treatment/Mobility

Program

Program Intervention Details: Assess/determine position change tolerance, functional activity tolerance, functional mobility status Coordinate therapy/activity/ambulation with daily disruption of pharmacologic sedatives/spontaneous awakening trials (SATs) Promote breathing re-training (e.g., inspiratory muscle training, diaphragmatic breathing) Provide/progress therapeutic interventions (e.g., ROM, strength/endurance training) as appropriate to meet goals and maximize outcomes

Prob Intervention Frequency Disciplines
Support Psychosocial Response Per CPG Interdiscipli
to Intubation/Mechanical Ventilation
Intervention Details: Minimize environmental stimulation
Monitor for signs/symptoms of delirium, anxiety, depression
Refrain from using physical restraints when possible
Consider use of complimentary therapy
Acknowledge/validate intensity and complexity of voicelessness
Employ a variety of nonverbal communication techniques
Involve patient/family/support system in decision making/treatment plan Start Date 03/06/17 End Date

End Date Prob Intervention Frequency Uscipiums on Promote Early Per CPG Interdisciplinary 0.3. Weaning Extubation Intervention Details: Regularly assess spontaneous breathing trial/extubation readiness Cluster/ organize care schedule per patient preferences/tolerance Decrease energy expenditure Facilitate uninterrupted sleep/rest pattern Determine need for adaptive equipment Provide periods of spontaneous breathing/decreased ventilator support Monitor/manage sedation/medication effects that may hinder weaning Facilitate discussion of treatment options if mechanical ventilation is prolonged Start Date

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Multi-Disciplinary Problems (continued) (from)

Prob Intervention Frequency Disciplines Start Date End Date
Prevent Ventilator-associated Per CPG Interdisciplinary 03/06/17 -Intervention Details: Advocate for early extubation
Elevate he ad of bed 30-45 degrees
Provide frequent oral care with antisoptic
Reduce aspiration risk (e.g., subglottic suctioning, gastric decompression)
Reduce environmental contamination of airway (e.g., consider in-line closed suction systems, ventilator circuit changes only when soiled, minimize disconnections)

Prob Intervention Frequency
Optimize Oxygenation/Ventilation Per CPG
Intervention Details: Maintain airway patency
Promote judicious use of oxygen
Provide pulmonary hygiene/secretion clearance
Monitor/manage pain/anxiety
Position/reposition
Closely monitor fluid balance
Consider use of PEEP **End Date**

Prob Intervention	Frequency	Disciplines	Start Date	End Date
Monitor/Manage Nutrition Support		Interdisciplinary	03/06/17	
Intervention Details: Determine nutr		fluid requirements		

Provide and supplemental nutrition, enteral preferred
Avoid over or underfeeding
Minimize interruption to enteral feedings
Monitor intake, tolerance/intolerance
Monitor fluid and electrolyte balance and bowel elimination pattern

Reviewed By



Education

Title: Generic Teaching Goals/Outcomes (Active)	
Points For This Title	
Point: Room/Orientation (Active)	
Description: Room/Orientation	
	Loarning Drogress Summany

Description. Hot	on onomination		Learning Progress Su	ummary		
Learner	Readiness	Method	Response	Comment	Documented by	Status
Patient	Nonacceptance	E	NE	no family at bedside, pt unresponsive, sedated intubated on hypothermia protocol	VA 03/07/17 1241	Active
	Nonacceptance	E	NR	Pt sedated and vented, needs orientation when pt	GD 03/06/17 2016	Active

Point: Pain and Pain Management (Active) Description: Pain and Pain Management

Learning Progress Summary Documented by VA 03/07/17 1241

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Education (continued)

bedside, pt
urresponsive,
sedated intubated
on hypothermia
protocol

Nonacceptance E NR Pt sedated and GD 03/06/17 2016 Active
vented, needs
orientation when pt
awake.

Point: Medications (Active) Description: Medications

Learning Progress Summary

Learning Progress Summary

Learning Progress Summary

Patient Nonacceptance E NE no family at bedside, pt unresponsive, sedated initibated on hypothermia protocol

Nonacceptance E NR Pt sedated and vented, needs orientation when pt

Point: Diagnostic Tests/Procedures (Active)
Description: Diagnostic Tests/Procedures

Point: Dietary Modifications (Active) Description: Dietary Modifications

 Learner
 Readines
 Method
 Learning Progress Summary
 Comment
 Documented by
 Status

 Patient
 Nonacceptance
 E
 NE
 no family at bedside, pt unresponsive, sedated intubated on hypothermia protocol
 VA 03/07/17 1241
 Active

 Nonacceptance
 E
 NR
 Pt sedated and vented, needs orientation when pt
 GD 03/06/17 2016
 Active

Point: Hygiene/Infection Prevention - Click Hyperlink to Print Patient Handouts (Active) Learning Progress Summary

Learning Progress Summary

Learning Progress Summary

Response

Comment

Documented by

Status

VA 03/07/17 1241

Active bedside, pt unresponsive, sedated intubated on hypothermia protocol

Nonacceptance

E

NR

Pt sedated and protocol

Nonacceptance

E

NR

Pt sedated and of D 03/06/17 2016

Active vented, needs orientation when pt severals.

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Education (continued)

Point: Rehabilitation (Active)

Jescription: Hehabilitation Learning Progress Summary							
Learner	Readiness	Method	Response	Comment	Documented by	Status	
Patient	Nonacceptance	E	NE	no family at bedside, pt unresponsive, sedated intubated on hypothermia protocol	VA 03/07/17 1241	Active	
	Nonacceptance	E	NR	Pt sedated and vented, needs orientation when pt awake.	GD 03/06/17 2016	Active	

Point: Medical Equipment/Supplies (Active) Description: Medical Equipment/Supplies

Learner	Readiness	Method	Response	Comment	Documented by	Status
Patient	Nonacceptance	E	NE	no family at bedside, pt unresponsive, sedated intubated on hypothermia protocol	VA 03/07/17 1241	Active
	Nonacceptance	E	NR	Pt sedated and vented, needs orientation when pt	GD 03/06/17 2016	Active

Point: Tobacco Cessation (Active) Description: Tobacco Cessation

Learning Progress Summary Response Co VA 03/07/17 1241 no family at bedside, pt unresponsive, sedated intubated on hypothermia protocol
Pt sedated and
vented, needs
orientation when pt Nonacceptance Ε NR GD 03/06/17 2016 Active

Point: Resources for Support (Active)
Description: Resources for Support

Learning Progress Summary
Response Comment Documented by VA 03/07/17 1241 no family at bedside, pt unresponsive, sedaled intubated on hypothermia protocol
Pt sedated and
vented, needs
orientation when pt Nonacceptance Е NR GD 03/06/17 2016 Active

Title: Mechanical Ventilation, Invasive (Adult) (Active)

Topic: Mechanical Vent, Invasive: Overview (Active) Point: Anatomy (Active) Description: Anatomy Learning Progress Summary
Response Co GD 03/06/17 2016 Nonacceptance

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Education (continued)

vented, needs orientation when pt

Point: Description (Active) Description: Description

Learning Progress Sum Response NR Comment
Pt sedated and vented, needs orientation when pt

Point: Physiology (Active) Description: Physiology

Learning Progress Summary
Response Co Comment
Pt sedated and vented, needs orientation when pt

Topic: Indications (Active)

Point: Acute Ventilatory Failure (Active) Description: Acute Ventilatory Failure

Learning Progress Summary Comment
Pt sedated and vented, needs orientation when pt Readiness Documented by GD 03/06/17 2016

Point: Prophylactic Ventilator Support (Active)
Description: Prophylactic Ventilator Support

Learning Progress Summary Comment Pt sedated and Documented by GD 03/06/17 2016 vented, needs orientation when pt

Topic: Treatment Plan (Active)

Point: Activity: Adaptive/Assistive Devices (Active)
Description: Activity: Adaptive/Assistive Devices

Learning Progress Summary Response C NR P Comment
Pt sedated and vented, needs orientation when pt

Point: Activity: Alternative Communication Techniques (Active)
Description: Activity: Alternative Communication Techniques

Learning Progress Summary
Response Co Comment
Pt sedated and vented, needs Readiness Nonacceptance orientation when pt

Point: Activity: Bed Mobility/Transfers (Active) Description: Activity: Bed Mobility/Transfers

Learning Progress Summary Response Co GD 03/06/17 2016 Nonacceptance

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Education (continued)

vented, needs orientation when pt

Point: Activity: Early Ambulation (Active) Description: Activity: Early Ambulation

Learning Progress Sum Response NR Comment
Pt sedated and vented, needs orientation when pt

Point: Treatment: Oral Hygiene (Active) Description: Treatment: Oral Hygiene

Learning Progress Summary
Response Co Comment
Pt sedated and vented, needs orientation when pt

Point: Treatment: Suctioning (Active) Description: Treatment: Suctioning

Learning Progress Summary Response Co Documented by Status GD 03/06/17 2016 Active Pt sedated and vented, needs Nonacceptance orientation when pt

Point: Treatment: Tube/Stoma Care (Active) Description: Treatment: Tube/Stoma Care

Learning Progress Summary Response Co Pt sedated and vented, needs orientation when pt GD 03/06/17 2016 Nonacceptance

Point: Procedure: Bronchoscopy (Active) Description: Procedure: Bronchoscopy

Learning Progress Summary Response C NR P Comment
Pt sedated and
vented, needs
orientation when pt

Point: Procedure: Chest X-Ray (Active) Description: Procedure: Chest X-Ray

Learning Progress Summary
Response C Comment
Pt sedated and vented, needs orientation when pt

Point: Procedure: Intubation (Active) Description: Procedure: Intubation

Learning Progress Summary

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Education (continued)

Point: Medication: Analgesics (Active) Description: Medication: Analgesics

Learning Progress Sumr Response NR Readiness Documented by GD 03/06/17 2016 Pt sedated and Nonacceptance vented, needs orientation when pt

Point: Procedure: Tube Changes (Active) Description: Procedure: Tube Changes

Learning Progress Summary

Pt sedated and GD 03/06/17 2016 Nonacceptance vented, needs orientation when pt

Point: Procedure: Weaning (Active) Description: Procedure: Weaning

Learning Progress Sum Pt sedated and vented, needs Documented by GD 03/06/17 2016 orientation when pt

Point: Medication: Antimicrobials (Active)
Description: Medication: Antimicrobials

Learning Progress Summary Comment
Pt sedated and vented, needs orientation when pt

Point: Medication: Anxiolytics (Active)
Description: Medication: Anxiolytics

Learning Progress Summary Response Comment
Pt sedated and vented, needs orientation when pt Documented by GD 03/06/17 2016 Readiness

Point: Medication: Neuromuscular Blockade (Active)
Description: Medication: Neuromuscular Blockade

Learning Progress Summary Response Comment
Pt sedated and vented, needs orientation when pt Documented by GD 03/06/17 2016 Nonacceptance

Point: Medication: Respiratory Agents (Active)
Description: Medication: Respiratory Agents

Learning Progress Summary Comment
Pt sedated and vented, needs orientation when pt Readiness Documented by Status
GD 03/06/17 2016 Active

Point: Medication: Sedation (Active)
Description: Medication: Sedation

Learning Progress Summary

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Education (continued)

Readiness Nonacceptance Comment
Pt sedated and
vented, needs
orientation when pt Documented by GD 03/06/17 2016

Point: Diet: Nutrition Support (Active)
Description: Diet: Nutrition Support

Learning Progress Summary

Comment nted by Pt sedated and vented, needs orientation when pt GD 03/06/17 2016 Active

Point: Diet: Swallow Evaluation Rationale (Active) Description: Diet: Swallow Evaluation Rationale

Learning Progress Summary Documented by GD 03/06/17 2016 Pt sedated and vented, needs orientation when pt

Topic: Self-Management (Active)

Point: Management of Underlying Condition (Active)
Description: Management of Underlying Condition

Learning Progress Summary
Response Comment
NR Pt sedated and vented, need to relate the whore Readiness GD 03/06/17 2016 Nonacceptance orientation when pt

Topic: When to Seek Medical Attention (Active)

Point: Difficulty Breathing (Active) Description: Difficulty Breathing

Learning Progress Summary Comment
Pt sedated and
vented, needs
orientation when pt Readiness

Point: Difficulty Swallowing (Active) Description: Difficulty Swallowing

Response Comment

NR Pt sedated and vented, needs orientation when pt Readiness GD 03/06/17 2016

Point: Hoarseness, Persistent (Active) Description: Hoarseness, Persistent

Learning Progress Summary

Comment

Comment Documented by GD 03/06/17 2016 Pt sedated and vented, needs orientation when pt

Point: Increased Work of Breathing (Active) Description: Increased Work of Breathing

Learning Progress Summary

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Education (continued)

Comment
Pt sedated and vented, needs orientation when pt Documented by GD 03/06/17 2016 Readiness

Point: Mental Status/Behavior Changes (Active) Description: Mental Status/Behavior Changes

Learning Progress Summary nted by Pt sedated and vented, needs orientation when pt GD 03/06/17 2016 Active

Title: Pressure Ulcer Risk (Braden Scale) (Adult, Obstetrics, Pediatric) (Active)

Topic: Pressure Ulcer Risk (Braden Scale): Personal Risk Factors and Signs/Symptoms (Active)

Point: Personal Risk Factors (Active)
Description: Personal Risk Factors

Learning Progress Summary Comment
Pt sedated and vented, needs Roadinoss Documented by GD 03/06/17 2016 Nonacceptance orientation when pt

Point: Signs/Symptoms Related to Pressure Ulcer Risk (Active) Description: Signs/Symptoms Related to Pressure Ulcer Risk

Learning Progress Summary
Response C
NR P Readiness vented, needs orientation when pt

Topic: Treatment Plan (Active)

Point: Activity: Pressure Redistribution Surfaces (Active) Description: Activity: Pressure Redistribution Surfaces

Learning Progress Summary Response Co Pt sedated and Active GD 03/06/17 2016 vented, needs orientation when pt

Point: Activity: Promote Sleep/Rest (Active)
Description: Activity: Promote Sleep/Rest

Learning Progress Summ Response NR Documented by GD 03/06/17 2016 Comment Pt sedated and vented, needs orientation when pt

Point: Treatment: Frequent Perineal Care (Active)
Description: Treatment: Frequent Perineal Care

Learning Progress Summary
Response Comment
NR Pt sedated and Documented by GD 03/06/17 2016 vented, needs orientation when pt

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Education (continued)

Point: Treatment: Glycemic Control (Active) Description: Treatment: Glycemic Control

Learning Progress Summary Response C Comment Pt sedated and Documented by GD 03/06/17 2016 Nonacceptance vented, needs orientation when pt

Point: Treatment: Infection Prevention (Active)

Description: Treatment: Infection Prevention

Learning Progress Summary Documented by GD 03/06/17 2016 vented, needs orientation when pt

Point: Treatment: Moisture Management (Active)
Description: Treatment: Moisture Management

Learning Progress Summary Comment
Pt sedated and vented, needs orientation when pt

Point: Treatment: Skin Care (Active) Description: Treatment: Skin Care

Learning Progress Summary
Response Comment
NR Pt sodated and
vented, needs
orientation when pt Documented by GD 03/06/17 2016 Readiness

Point: Treatment: Skin Inspection (Active) Description: Treatment: Skin Inspection

Learning Progress Summary Documented by GD 03/06/17 2016 Pt sedated and vented, needs orientation when pt

Point: Medication: Analgesics (Ac Description: Medication: Analgesics ics (Active)

Learning Progress Summary Comment
Pt sedated and vented, needs orientation when pt Readiness Documented by Status GD 03/06/17 2016 Active

Point: Diet: Adequate Calories (Active) Description: Diet: Adequate Calories

Learning Progress Summary

Documented by GD 03/06/17 2016 Comment Pt sedated and

Point: Diet: Adequate Fluid Intake (Active) Description: Diet: Adequate Fluid Intake

Learning Progress Summary Documented by Status

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HERNANDEZ, JOHN ANTHONY

GD 03/06/17 2016 Active

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Education (continued)

Nonacceptance

Pt sedated and vented, needs orientation who

Point: Diet: Adequate Protein (Active) Description: Diet: Adequate Protein

Learning Progress Summary
Response Comment
NR Pt sedated and vented, needs

Documented by Status GD 03/06/17 2016 Active

Point: Diet: Vitamins/Minerals (Active) Description: Diet: Vitamins/Minerals

Learning Progress Su Response NR Comment
Pt sedated and Nonacceptance vented, needs orientation when pt

Documented by GD 03/06/17 2016

Point: Activity: Avoidance of Entrapment (Active) Description: Activity: Avoidance of Entrapment

Learning Progress Summary Comment
Pt sedated and Readiness Nonacceptance Documented by GD 03/06/17 2016 vented, needs orientation when pt

Point: Activity: Frequent Position Changes (Active)
Description: Activity: Frequent Position Changes

Learning Progress Summary Response C Documented by GD 03/06/17 2016 Comment Pt sedated and vented, needs orientation when pt

Point: Activity: Friction/Shear Reduction (Active)
Description: Activity: Friction/Shear Reduction

Learning Progress Summary Readiness GD 03/06/17 2016 Pt sedated and vented, needs Nonacceptance orientation when pt

Topic: Self-Management (Active)

Point: Signs and Symptoms of Infection (Active) Description: Signs and Symptoms of Infection

Learning Progress Summary ed by Pt sedated and vented, needs orientation when pt GD 03/06/17 2016

Point: Skin Care/Treatment (Active) Description: Skin Care/Treatment

Learning Progress Summary

Documented by GD 03/06/17 2016 Pt sedated and

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MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Education (continued)

orientation when pt

Point: Use of Pressure Reducing Devices (Active)
Description: Use of Pressure Reducing Devices

Learning Progress Summary

Comment
Pt sedated and vented, needs orientation when pt

Point: Activity/Rest Balance (Active) Description: Activity/Rest Balance

Learning Progress Summary Response Co Documented by GD 03/06/17 2016 Pt sedated and vented, needs Nonacceptance orientation when pt

Point: Adequate Nutrition/Fluid Intake (Active) Description: Adequate Nutrition/Fluid Intake

Learning Progress Summary Response C

Readiness Documented by GD 03/06/17 2016 Pt sedated and vented, needs orientation when pt Nonacceptance

Point: Avoidance of Entrapment (Active) Description: Avoidance of Entrapment

Learning Progress Summary Response Co NR Pt Pt sedated and vented, needs Documented by GD 03/06/17 2016 Nonacceptance orientation when pt

Point: Bowel/Bladder Management (Active)
Description: Bowel/Bladder Management

Learning Progress Summary Readiness

Comment
Pt sedated and vented, needs orientation when pt

Point: Frequent Positioning (Active) Description: Frequent Positioning

Learning Progress Summary

Comment
Pt sedated and vented, needs orientation when pt Documented by GD 03/06/17 2016

Point: Frequent Skin Inspection (Active) Description: Frequent Skin Inspection

Learning Progress Summary

Comment Readiness Documented by Pt sedated and vented, needs orientation when pt GD 03/06/17 2016

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983. Sex: M Adm: 3/6/2017, D/C:

Education (continued)

Point: Friction and Shear Reduction (Active)
Description: Friction and Shear Reduction

Learning Progress Summary Comment Pt sedated and GD 03/06/17 2016 Nonacceptance vented, needs orientation when pt

Point: Recurrence Prevention Strategy (Active)

Description: Recurrence Prevention Strategy

Learning Progress Summary vented, needs orientation when pt

Topic: When to Seek Medical Attention (Active)

Point: Inadequate Nutrition/Fluids (Active) Description: Inadequate Nutrition/Fluids

Learning Progress Summary
Comment
Comment Readiness

Pt sedated and vented, needs orientation when pt Nonacceptance GD 03/06/17 2016 Active

Point: Negative Impact On Physical or Psychosocial Well-Being (Active) Description: Negative Impact On Physical or Psychosocial Well-Being

Learning Progress Summary

Comment Pt sedated and Documented by GD 03/06/17 2016 vented, needs orientation when pt

Point: Pain Unresolved or Worsening (Active)
Description: Pain Unresolved or Worsening

Learning Progress Summary Readiness Nonacceptance Documented by GD 03/06/17 2016 Comment Pt sedated and vented needs orientation when pt

Point: Signs/Symptoms of Infection (Active) Description: Signs/Symptoms of Infection

Learning Progress Sum Response NR Pt sedated and vented, needs orientation when pt Readiness Documented by GD 03/06/17 2016 Nonacceptance

Point: Skin Breakdown Present (Active) Description: Skin Breakdown Present

Learning Progress Summary
Response Comment Documented by GD 03/06/17 2016 Pt sedated and vented, needs orientation when pt Nonacceptance

Title: Fall Risk (Adult) (Active)

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Education (continued)

Topic: Personal Risk Factors & Signs/Symptoms (Active)

Point: Personal Risk Factors (Active) Description: Personal Risk Factors

Learning Progress Summan Response C

Comment
Pt sedated and vented, needs orientation when pt

orientation when pt

Documented by Status GD 03/06/17 2016 Active

Point: Signs and Symptoms Related to Fall Risk (Active) Description: Signs and Symptoms Related to Fall Risk

Nonacceptance

Learning Progress Summan Response C Comment Pt sedated and vented, needs

Documented by GD 03/06/17 2016

Topic: Treatment Plan (Active)

Point: Awareness of Meds Increasing Fall Risk (Active) Description: Awareness of Meds Increasing Fall Risk

Learning Progress Summary Readiness Nonacceptan

Comment
Pt sedated and vented, needs orientation when pt Documented by GD 03/06/17 2016

Point: Diet: Adequate Fluids/Nutrition (Active) Description: Diet: Adequate Fluids/Nutrition

Learning Progress Summary

Documented by GD 03/06/17 2016

Pt sedated and vented, needs orientation when pt

Point: Assistance With Out of Bed Activities (Active)
Description: Assistance With Out of Bed Activities

Readiness

Learning Progress Summary

Comment
Pt sedated and vented, needs orientation when pt Documented by Status GD 03/06/17 2016 Active

Point: Environmental Risk Reduction (Active)
Description: Environmental Risk Reduction

Learning Progress Summary

Comment Pt sedated and

Documented by GD 03/06/17 2016 vented, needs orientation when pt

Documented by GD 03/06/17 2016

Point: Orientation/Reorientation Rationale (Active)
Description: Orientation/Reorientation Rationale

Learning Progress Summary

Comment Pt sedated and

vented, needs

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HERNANDEZ, JOHN ANTHONY

MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Education (continued)

Point: Behaviors That Increase Risk (Active)
Description: Behaviors That Increase Risk

Learning Progress Summary Response C Comment Pt sedated and GD 03/06/17 2016 Nonacceptance vented, needs orientation when pt

Topic: Self-Management (Active)

Point: Potential Environmental Hazard Identification (Active) Description: Potential Environmental Hazard Identification

Learning Progress Summary
Response Comment
NR Pt sedated and
vented, needs
orientation when pt GD 03/06/17 2016

Point: Safety Measures (Active) Description: Safety Measures

Learning Progress Summary
Comment
Comment Pt sedated and vented, needs orientation when pt GD 03/06/17 2016

Point: Energy Conservation Techniques (Active)
Description: Energy Conservation Techniques

Learning Progress Summary

Comment Pt sedated and Documented by GD 03/06/17 2016 vented, needs orientation when pt

Point: Safe Timing of Medication (Active) Description: Safe Timing of Medication

Learning Progress Summary

Documented by GD 03/06/17 2016 Comment Pt sedated and Nonacceptance vented needs orientation when pt

Topic: When to Seek Medical Attention (Active)

Point: Actual Fall (Active) Description: Actual Fall

Learning Progress Summary
Response Comment
NR Pt sedated and vented, needs Documented by Status GD 03/06/17 2016 Active orientation when pt

Point: Increase In Risk Factors (Active)
Description: Increase In Risk Factors

Learning Progress Summary Documented by GD 03/06/17 2016 Readiness

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MRN: DOB: 2/10/1983, Sex: M Adm: 3/6/2017, D/C:

Education (continued)

Point: Inadequate Caregiver Support (Active)
Description: Inadequate Caregiver Support

Learning Progress Sumi Response Documented by GD 03/06/17 2016

Pt sedated and vented, needs orientation when pt

Provider Type Registered Nurse Registered Nurse Discipline Nursing Nursing Effective Dates 10/29/15

END OF REPORT

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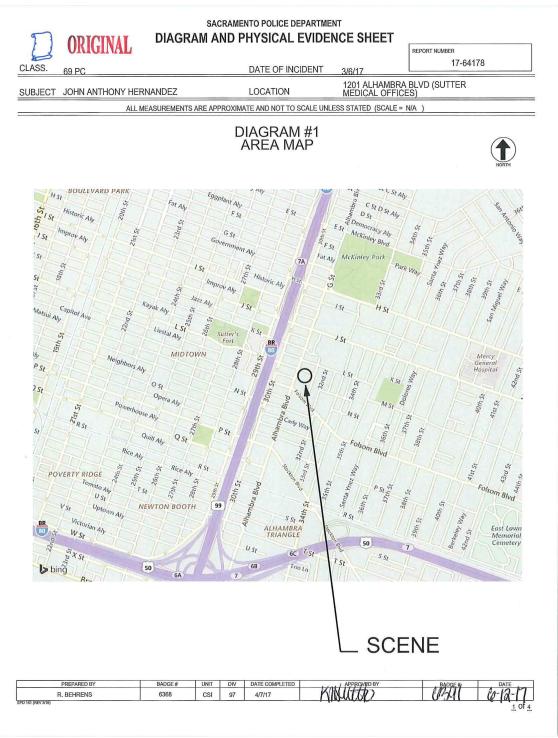
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Related Attachment(s) - DIAGRAMS

Attachment Description: CSI SCENE DIAGRAMS - FI BEHRENS

Reference Number:



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RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REPORT NUMBER

DATE OF INCIDENT 3/6/17

17-64178

SUBJECT JOHN ANTHONY HERNANDEZ

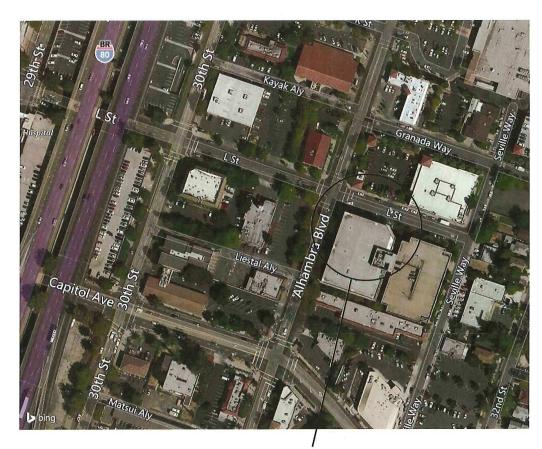
ORIGINAL

LOCATION

1201 ALHAMBRA BLVD (SUTTER CLINIC)

DIAGRAM #2 AREA MAP





SCENE

PREPARED BY	DAUGE #	DIVIT	DIV	DATE COMPLETED	AFFROVEDBI	DAUGE#	DATE	
R. BEHRENS	6368	CSI	97	4/7/17	KNNUCTO	(889)	612-17	
SPD 141 (REV 3/16)	•				111100-0000		<u>2</u> of <u>4</u>	

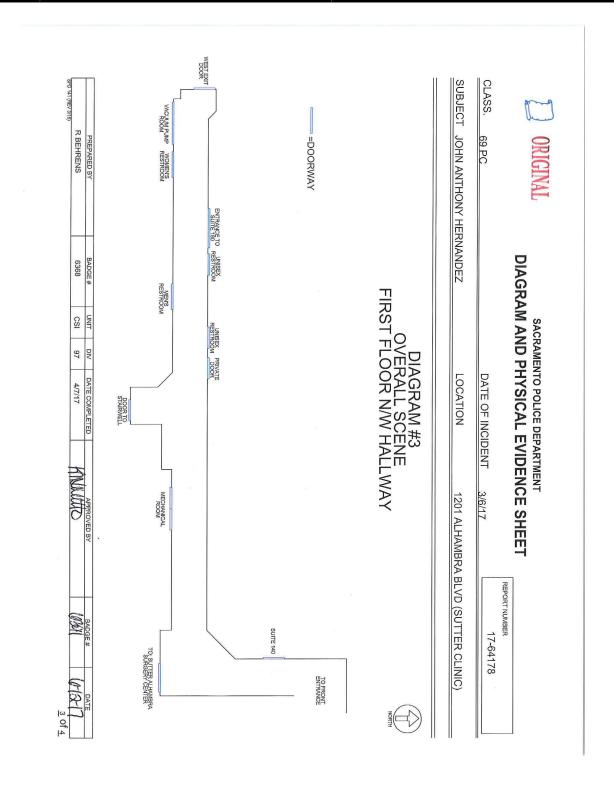
For: **4008** Printed On: **Oct-04-2019** (**Fri.**) Page **874** of **1224**



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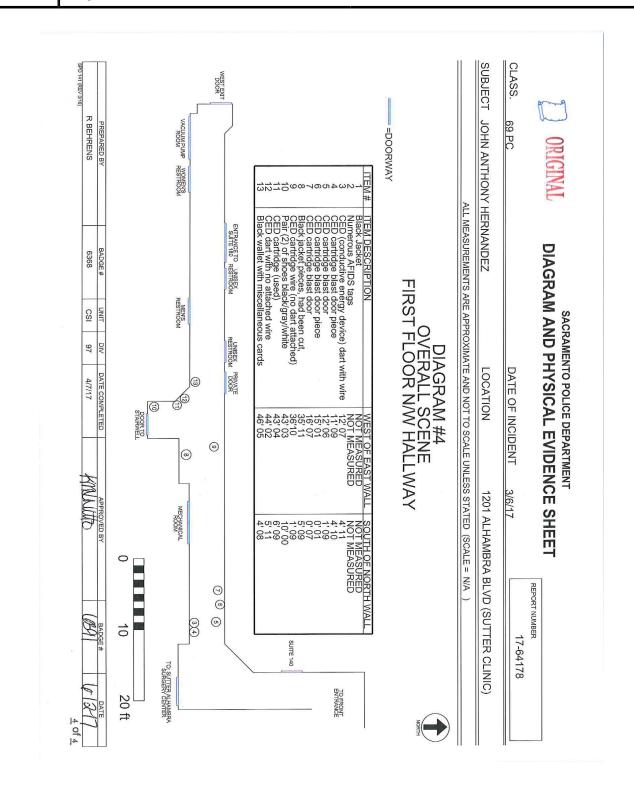
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Related Attachment(s) - ATTACHMENTS

Attachment Description: BWC REQUEST

Reference Number:

Requestor Norma Florendo		Badg	#	Division	Phone #	
Name of Agency (Outside Agency I	Request Only)	Date	of Req	uest	Date Required	
Sacramento City Attorne	y's Office	12/5	2017		12/11/2017	
Title Paralegal				Phone # 808-5346		
CAD/Report Number CAD	2017-64178					
Date/Time of Incident Vehicle # 3/6/2017		Type of Incider Disturbance				
SPD Officers Involved in the	Incident (Name & Badge	· #)				
1.		2.				
M. Hight #345		C. Dionne	#395			
I. Villegas #820 Specific footage requested (Any and all contact with Jo parking lot area, to contact	hn Anthony Hemandez at l at Sutter Hospital (1201 L	4. D. Paiz #0 Dursuit, etc.) Rite Aid (1125 Alham	270		including travel throu	
I. Villegas #820 Specific footage requested (Any and all contact with Jo	hn Anthony Hernandez at lat Sutter Hospital (1201 L	4. D. Paiz #0 Dursuit, etc.) Rite Aid (1125 Alham	270		including travel throu	
I. Villegas #820 Specific footage requested (Any and all contact with Jo parking lot area, to contact Additional Information/Incid	hn Anthony Hemandez at l at Sutter Hospital (1201 L ent Information/Officers ditional officers involved.	4. D. Paiz #0 Dursuit, etc.) Rite Aid (1125 Alham	270 bra Bl		including travel throu	
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SPD 524 (Rev 06/17)

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Attachment(s) - ATTACHMENTS

Attachment Description: ICC REQUEST

Reference Number:

Norma Florendo Name of Agency (Outside Agency Sacramento City Attorn			Badge #	Division	Phone #
Sacramento City Attorn	y Request Only)		Date of Re	guest	Date Required
	ey's Office		12/5/201	•	12/11/2017
Title Paralegal		Address Phone 915 St., 4th Fir 808-5			
CAD/Report Number CAE	2017-64178				
Date/Time of Incident	Vehicle #	Type of	Incident		
3/6/2017	Multiple	Distu	bance		
SPD Officers Involved in th	ne Incident (Name & Badg	e #)	_		
1. M. Hight #345		2. C. D	ionne #39	5	
3. I. Villegas #820		4.	aiz #0270		
Please see attached for a	additional officers involved.				
Additional Information/Inci Please see attached for a Approving Person (When I PRINT NAME	additional officers involved.			BADGE#	
Please see attached for a	additional officers involved.			BADGE#	тіме
Please see attached for a Approving Person (When I PRINT NAME	additional officers involved. Required per G.O. 525.03)				TIME
Please see attached for a Approving Person (When I PRINT NAME SIGNATURE	Required per G.O. 525.03) REP. DISTRICT ATTORNEY OR C		Name		TIME

SPD 524 (Rev 06/17)

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PUBLIC HARDCOPY

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GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Attachment(s) - LAB RESULTS

Attachment Description: (S) HERNANDEZ TOXICOLOGY REPORT

Reference Number:



Sacramento County
District Attorney's Office

ANNE MARIE SCHUBERT
District Attorney

Stephen J. Grippi Chief Deputy

Michael A. Neves Assistant District Attorney

> Edward M. Pollock Laboratory Director

March 21, 2017

Sacramento Police Department 5770 Freeport Blvd. Suite 100 Sacramento, CA 95822 LAB NO: 17-001746 REQUEST NO: 0002

AGENCY NO: SPD-17-064178

NAME: Hernandez, John A

Toxicology Report

Submission: 001

Source: Hernandez, John A Sample Type: blood Date Received: 3/8/2017

Drug Classes Evaluated

amphetamine, benzodiazepines, benzoylecgonine (cocaine metabolite), carisoprodol, methadone, methamphetamine, opiates, oxycodone, zolpidem, tetrahydrocannabinols.

Drugs Confirmed	Concentration	Estimated Uncertainty (99.7% confidence at k=3)	Analyst
methamphetamine	1781 ng/mL	± 303 ng/mL	Nakayama, Matthew
amphetamine	108 ng/mL	±22 ng/mL	Nakayama, Matthew

NOTE:

Name on tube 001-01: Hernandez, John Anth

Date collected: 03/06/17 Time collected: 1520

Matthew Nakajama

March 20, 2017

Date

Matthew Nakayama, Criminalist

LABORATORY OF FORENSIC SERVICES 4800 Broadway, Suite 200 - Sacramento, CA 95820 (916) 874-9240 FAX (916) 321-2230

www.sacda.org
This report contains the results and conclusions of the signing analyst.
Supporting examination documentation is maintained in the case file.

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Sacramento Police Department

Agency No: SPD-17-064178

Toxicology Report: 17-001746 (0002) - Continued

Technical Reviewer

Karen Buckman, Criminalist

Administrative Reviewer

Craig Triebold, Criminalist

Date

Triebold 3/21/2017

LABORATORY OF FORENSIC SERVICES 4800 Broadway, Suite 200 - Sacramento, CA 95820 (916) 874-9240 FAX (916) 321-2230 www.sacda.org

This report contains the results and conclusions of the signing analyst. Supporting examination documentation is maintained in the case file.

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POLICE

SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Person(s)

1. VICTIM # 1 - VILLEGAS, I 820 1048

(Case Specific Information)

Sex: MALE

Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN

Date of birth:

Municipality: SACRAMENTO, California

LEOKA details

Officer's assignment: ONE PERSON/VEHICLE ALONE

Weapon used: HANDS, FISTS, OR FEET

Injury sustained by officer: **INJURED, NOT FATALITY** Officer's activity when assaulted: **DISTURBANCE CALL**

2. VICTIM # 2 - HIGHT, M 345 413

(Case Specific Information)

Sex: MALE

Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN

Date of birth:

Municipality: SACRAMENTO, California

LEOKA details

Officer's assignment : **ONE PERSON/VEHICLE ALONE**

Weapon used: HANDS, FISTS, OR FEET

Injury sustained by officer: **INJURED, NOT FATALITY** Officer's activity when assaulted: **DISTURBANCE CALL**

3. VICTIM # 3 - DIONNE, C 395 240

(Case Specific Information)

Sex: MALE

Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN

Date of birth:

Address: **RESTRICTED**

Municipality: SACRAMENTO, California

LEOKA details

Officer's assignment: **ONE PERSON/VEHICLE ALONE**

Weapon used: HANDS, FISTS, OR FEET

Injury sustained by officer: **INJURED, NOT FATALITY** Officer's activity when assaulted: **DISTURBANCE CALL**

4. VICTIM # 4 - PAIZ, D 270 3683

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

(Case	Sr	eci	fic :	Inf	for	mat	tion))
•	Cube	~r				_		,_,,	

Sex: MALE

Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN

Date of birth:

Municipality: SACRAMENTO, California

LEOKA details

Officer's assignment: **ONE PERSON/VEHICLE ALONE**

Weapon used: HANDS, FISTS, OR FEET

Injury sustained by officer: INJURED, NOT FATALITY Officer's activity when assaulted: DISTURBANCE CALL

5. SUSPECT # 1 - HERNANDEZ, JOHN ANTHONY

(Case Specific Information)

Sex: MALE

Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN

Date of birth: **Feb-10-1983**

Address:

Municipality:

Phone Numbers

MAIN

HOME PHONE:

6. INVOLVE-OFR # 1 - HARRISON, R 980 4349

(Case Specific Information)

Sex: MALE

Race: AFRICAN AMERICAN/BLACK

Date of birth:

Municipality: SACRAMENTO, California

7. INVOLVE-OFR # 2 - CUNNINGHAM, A 496 3644

(Case Specific Information)

Sex: FEMALE

Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN

Date of birth:

Municipality: SACRAMENTO, California

Alias(es)/AKA

Name: Sex: DOB: Address:

PANE, A 0496 3644 RESTRICTED, F

8. INVOLVE-OFR # 3 - SPRING, K 1006 18703

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4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

(Case Specific Information)
Sex: MALE Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN Date of birth: Municipality
9. WITNESS # 1 -
(Case Specific Information) Sex: MALE Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN Date of birth: Address: Municipality:
10. WITNESS # 2 -
(Case Specific Information) Sex: MALE Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN Date of birth: Address: Municipality: Phone Numbers CELL PHONE:
11. WITNESS # 3 -
(Case Specific Information) Sex: FEMALE Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN Date of birth: Address: Apartment: Municipality: Phone Numbers CELL PHONE:
12. WITNESS # 4 -
(Case Specific Information) Sex: FEMALE Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN Date of birth:

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Address:				
Municipality: Phone Numbers CELL PHONE:				
13. WITNESS # 5 -				
(Case Specific Information) Sex: FEMALE Race: CAUCASIAN/WHITE/HIS Date of birth: Municipality: Phone Numbers CELL PHONE:	SPANIC/EAST INDIA	N/GUAMANIAN		
14. WITNESS # 6 -				
(Case Specific Information) Sex: MALE Race: AFRICAN AMERICAN/B Date of birth: Address: Municipality: Phone Numbers CELL PHONE:	LACK Apartment	-		
15. WITNESS # 7 -				
(Case Specific Information) Sex: FEMALE Race: CAUCASIAN/WHITE/HIS Date of birth: Address: Municipality: Phone Numbers CELL PHONE:	SPANIC/EAST INDIA	N/GUAMANIAN		
Alias(es)/AKA				
Name: 16. WITNESS # 8 -	Address:		Sex:	DOB:

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

VARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

	GO# SA 2017-64178 SUSPENDED-W REQUESTED
(Coso Specif	ic Information)
(Case Specii	ic imormation)
Sex: MALE	
Race: AFRIC	CAN AMERICAN/BLACK
Date of birth:	
Address:	
Mu	nicipality:
Phone Numb	<u>ers</u>
CELL	,

17. WITNESS # 9 -

(Case Specific Information)

Sex: **FEMALE**

Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN

Apartment:

Date of birth: Address:

Municipality:

Phone Numbers

PHONE:

MAIN

HOME PHONE:

18. WITNESS # 10 -

(Case Specific Information)

Sex: MALE

Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN

Date of birth: Address

Municipality:

Phone Numbers

CELL PHONE:

19. SUBJECT # 2 -

(Case Specific Information)

Sex: **FEMALE**

Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN

Date of birth: Address:

Municipality:

Phone Numbers

MAIN

HOME PHONE:

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GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

20. SUBJECT # 3 -
(Case Specific Information)
Sex: MALE
Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN
Date of birth:
Address: Apartment:
Municipality:
Phone Numbers
MAIN
HOME PHONE:
21. SUBJECT # 4 -
(Case Specific Information)
Sex: MALE
Race: ASIAN (ALL)/ PACIFIC ISLANDER
Date of birth:
Address:
Municipality:
Phone Numbers
MAIN
HOME PHONE:
BUSINESS PHONE:
PHONE:
22. SUBJECT # 5 -
(Case Specific Information)
Sex: FEMALE
Race: CAUCASIAN/WHITE/HISPANIC/EAST INDIAN/GUAMANIAN
Date of birth:
Address:
Municipality:
Phone Numbers CELL
PHONE:
THORL.

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Text Page(s)

Document: **02 WITNESS STATEMENT**Author: **3212 - BOHRER, CYNTHEA 0250**

Subject:

Related date/time: Mar-06-2017 (Mon.) 1630

On 3-6-17 at appx. 1600 hrs., I, Ofc. Bohrer contacted W- at 1201 Alhambra Bl. (Rite Aid). W- stated the following in summary:

I am the manager here. I did not see the incident that happened with the police. I did see the individual you are describing in the store earlier today. I want to say it was before 1300 hrs. The subject was a hispanic male, 30-35 years old, with lots of tattoos. I remember he had a tattoo of a tear drop on the left side of his face. The guy had been coming in and of the store for appx. an hour. He was standing just inside the doorway for a few minutes. The guy told me that he was just waiting for a ride. He was not being agressive or violent with anybody in the store. He did look like he was on something as he couldn't stand still. I do not remember seeing this guy before today.

The guy I am referring to is the same guy I showed you in the video at 1204 hrs. today.

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GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Text Page(s)

Document: **02 WITNESS STATEMENT**Author: **3212 - BOHRER, CYNTHEA 0250**Subject:

Related date/time: Mar-06-2017 (Mon.) 1636

On 3-6-17 at appx. 1530 hrs., I, Ofc. Bohrer contacted W-Market at Alhambra Bl. at L St. W-Market stated the following in summary:

I am one of the original complainants about that guy (referring to S-Hernandez) that Fire is taking on the gurney now. I had been at the ER at Sutter (1201 L St.) for an appointment. When I came down to the parking garage to get my car, I was confronted by S-Hernandez. S-Hernandez was in the parking lot with no shirt on. S-Hernandez came at me really agressively like he wanted to fight me. His fists were balled up and he was puffing out his chest at me. I don't remember what he was saying. I walked away from him, and when I looked back he was swinging his fists in the air. I was appx. 15 ft. from him so he wasn't close enough to hit me. He appeared to be on drugs. He was 'twitchy'.

I went around the corner with my girlfriend (), and she is the one who called the police.

We came back a few minutes later to try and get my car, but the guy was still there. He had put a hoodie on at this point so I called dispatch to let them know.

I did not see the incident between the guy and the cops. While and I were eating, we saw a bunch of cop cars fly by us. I saw a bunch of cops running. The guy I called in about, is the same guy that I just saw on the gurney. The guy was a hispanic male around 40 years old, short blackish-gray hair, and he had a tear drop tattoo on the left side of his face.

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PUBLIC HARDCOPY

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GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Text Page(s)

Document: 02 WITNESS STATEMENT Author: 3212 - BOHRER, CYNTHEA 0250 Subject:

Related date/time: Mar-06-2017 (Mon.) 1717

On 3-6-17 at appx. 1535 hrs., I, Ofc. Bohrer contacted W-Alhambra Bl. and L St. W-Stated the following in summary:

I was at Sutter Hospital with my boyfriend (South Laborated By that guy we just saw on the garage to get to his car, we were confronted by that guy we just saw on the gurney (referring to S-Hernandez). S-Hernandez was trying to fight South He was puffing out his chest towards and I went around the corner, and that is when I first called the police about S-Hernandez.

I called my mom (), and she came over to pick us up. My mom told told me that there was a crazy guy over here in the parking lot that was jumping on her car.

We saw S-Hernandez again when my mom picked us up. At this time, S-Hernandez had put on a hooded sweatshirt and called back to give police dispatch an update (see call 17-64202).

I did not see the incident when the cops showed up. I just saw all the cop cars, and as and I were walking back to his car we saw S-Hernandez on the gurney.

The subject we called in about is a hispanic male with lots of tattoos, appx. 40-45 years old, appx. 5-8 with a muscular build, shaved hair, and he had a tattoo on his face. He appeared to be on a stimulant drug as he was acting angry and violent. He tried to hit on me, and I felt he was just creepy. He was talking very rapidly, but he was mumbling and I couldn't understand what he was saying.

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POLICE

SACRAMENTO POLICE DEPARTMENT

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Related Text Page(s)

Document: 02 WITNESS STATEMENT Author: 3533 - ROBISON, BRAD 0414

Subject: (WITNESS #9)
Related date/time: Mar-08-2017 (Wed.) 639

On 03/07/17 at approx 1400 hours I contacted at her place of work located at 1201 Alhambra Blvd. The purpose of this interview was to go over her initial statement to confirm its accuracy and to see if she had additional information to provide. This interview was audio recorded. A CD housing the interview was later booked into evidence.

Yes, what you read is about what happened. I walked over to Rite Aid and I saw the same guy standing in the parking lot. This was the first time I saw him. I remember him because he had a mole on his face. The guy was pacing back and forth and it seemed like he was talking to another gentlemen. Nothing seemed out of the ordinary. I came back to work and used the bathroom. I came out to the hall way when I heard a ruckus.

I did hear one of the heavier set cops say "I'm going to fuck you up". I don't know if it came out of his mouth. I didn't see it come out of his mouth. Their backs were to me. I didn't see who it came from. I heard it a couple of times while they had the guy on the ground.

The sounds I heard sounded like one of my co-workers so I rushed out. I was not able to tell which one of the officers used the tazer. I saw one of the heavy set officers who looked Mexican to me use the baton. He hit the guy a few times. He hit him 2-3 times. As the guy was being hit I heard an officer say "Stop. Give up." I don't know who said it but they were saying it to him.

Yes, I know the guy the officers were fighting with was the same guy I saw in the parking lot. I saw the mole on his face while they were fighting with him.

After showing a mugshot photo of Hernandez she stated the following in summary:

Yes, that is the same guy who was fighting with the officers.

I would say that the guy was resisting for sure. He was being resistant. He said "Get off of me. Get off of me". He was kicking his feet. One of his shoes was off. I saw him moving his feet. I think he was trying to kick the officers by moving his feet. I couldn't see where his hands were. The officers were on top of him and their backs were towards me.

Yes, the officers acted appropriately. He was resisting I would assume to keep him down. I didn't see the guy comply with anything the officers said. The officers wanted more help. They were struggling with the guy for sure.

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Related Text Page(s)

Document: 02 WITNESS STATEMENT
Author: 3533 - ROBISON, BRAD 0414
Subject: (WITNESS #10)
Related date/time: Mar-08-2017 (Wed.) 722

On 03/07/17 at approx. 0800 hours I contacted at HOJ where I obtained his statement. The statement was video and audio recorded. A copy of the interview was later booked into evidence. stated the following in summary:

I am a security guard for Allied Reversal Security. I have worked for them for one year. I have been a security guard for about 4 years nows. I am assigned to 1201 Alhambra blvd. I work there full time. My hours are from 1330 hours-2130 hours and I wear a uniform.

Yesterday(03/06/17) I got to work at about 1315 hours. I walked in to the area where I work and got the security phone. This is the phone that people can call if they need us. I had not even signed in before I got a call for help. The call was from room 420. She said to come here but she didn't explain. Her voiced seemed like she was scarred. I got in the elevator and went to room 420. When I got there the door was locked. Part of the door is glass so I could see inside. The guy didn't have a shirt on and his jacket was on the floor of the bathroom. I told the guy to open the door, which he did. I'm not sure if there were people in the waiting room. I saw that the nurse was under the desk because she was scarred. A doctor or someone came out too.

I tell the guy lets go. The guy had all tattoos all over his chest. He had his shirt off and he was wearing pants and shoes. I told him to take his clothes and leave this place. I opened the door and said lets go. He looked scarred. It might have been drugs or he might have been crazy. When I open the door he said "Where's the dog? Where's the dog?" He was looking around quickly. There was no dog.

After a few seconds he came out to the hall way. He was moving fast and seemed scarred. He kept looking around. I touched him to guide him and he did not like that. He pulled back from me. I called the other security guard was going to cover my back. I thought he guy might be homeless.

I wasn't afraid that he would attack me but I was thinking about it. I also thought that he might attack a patient.

I wasn't afraid that he would attack me but I was thinking about it. I also thought that he might attack a patient There was no one else in the hallways at this point. Once got there I told the guy to talk to Maybe he didn't understand me. Talked good to him and got him to start walking down stairs. We escorted him down the stair well and out of the building(Through the west door. We opened the door and told him to go outside.

He walked down Alhambra Blvd towards L St. Once he got outside I walked back to my station, which is at the main entrance. While I was standing there I watched the guy as he walked to the Rite Aid parking lot. The was sitting on the concrete next to the bushes.

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POLICE

SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

After showing a picture of Hernandez he stated the following in summary:

Yes, that is the guy I was dealing with. Once he was in the Rite Aid parking lot he stayed there, but I'm not sure how long. I saw him shaking some guys hand and the guy gave him some juice or something. After that I walked outside the main doors and stayed outside. The guy saw me and crossed the street. He comes over to shake my hand, which I did not do. I told him to go away. He pat me on the back and told him not to stay here and to go away. He wasn't trying to get back into the facility. He said something but I couldn't understand it. The guy went back to the Rite Aid parking lot for about ten minutes. That's when the police came. No, I didn't call the police. It was probably someone from the fourth floor. If the homeless listen to us we don't have to call the police. If they leave and the place is safe I don't have to call. I stayed outside to not let him in. He wasn't attacking anyone so I didn't call.

I see a couple of police cars show up. Two police exit and one of them has a tazer. They told the guy to get on his knees. The guy put his hands up for a few seconds and then he ran once he saw the tazer. The guy ran right inside my building. The police starter chasing him into the building. The guy tried to take the elevator but he had to wait. The guy then ran down the hallway. The police caught him in the hallway. I didn't see a lot. The police told me to stay there. I looked down the hallway. I could see that he was on the ground. The police were trying to arrest him but I couldn't see everything. I was from a distance. I didn't see any of the officers use a tazer. I'm not sure what the officers were saying. I stayed in a safe place. There were a lot of police. I don't remember if I told another officer if I heard anything.

I stayed near the main entrance. I never saw how they got him out of there. They must have gone out of the west entrance.

While he was in the Rite Aid parking lot he was going up to people and shaking their hands. I don't know if it's normal behavior. I would not behave like that. Wouldn't behave that way. No one who works at my building would behave like that. I have seen homeless behave similar to this when they beg for things. It seemed out of ordinary. I thought he was on drugs, mentally sick or drunk.

One of the officers had a big stomach maybe. I was a lot of feet away. I'm not sure which officer had the tazer. I thought they would just take him and go, but he ran. The officer that had the tazer got out of the car that had two officers. Once they ran into the building I could not see what the officers were doing.

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Related Text Page(s)

Document: 02 WITNESS STATEMENT

Author: 3170 - ENGLEFIELD, ASHLEY 0563 (

Subject: OFFICER HARRISON

Related date/time: Mar-17-2017 (Fri.) 1253

On 3-6-17 at about 2349 HRS I interviewed OFC Harrison #980 inside interview room #6 at SPD headquarters. OFC Harrison's SPOA representative, Kevin Wiemer (Mastagni Holstedt) was also present. The interview was video recorded and later booked into evidence under SPD PR# 948810-002. The following transcript is not a word for word interpretation of the video recording. The transcription contains the relevant content of the interview. For exact detail please refer to the recording. The following interview took place:

DET. ENGLEFIELD: You can go ahead and have a seat.

HARRISON: Okay.

WIEMER: You mind if I auto record?

DET. ENGLEFIELD: Absolutely. Go ahead. That's - that'?'s fine.

I'm sorry. One more thing and I'll shut up. WIEMER:

DET. ENGLEFIELD: Yep.

WIEMER: Officer Harrison is doing of this with the understanding that the video is not going to be

made public.

Of this interview? **DET. ENGLEFIELD:**

WIEMER: Yes.

DET. ENGLEFIELD: Correct. Thank you.

WIEMER: Thank you.

DET. ENGLEFIELD: Officer, badge number and full name if you would.

HARRISON: Badge - badge number 980. Robert Anthony Harrison.

DET. ENGLEFIELD: Common spelling on all...

HARRISON: Yes.

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...the name? **DET. ENGLEFIELD:**

HARRISON: Yes, sir.

DET. ENGLEFIELD: And you are (Kevin Wa- Wiemer)?

WIEMER: Yep.

DET. ENGLEFIELD: Okay. How long have you been with Sac PD?

As an officer about eight - eight and a half months. HARRISON:

DET. ENGLEFIELD: Okay.

HARRISON: But I started as a pre-hire back in October of last year.

DET. ENGLEFIELD: Okay. So it's - but it's sworn about eight months?

HARRISON: But sworn about eight months.

DET. ENGLEFIELD: Okay.

HARRISON: Right.

Um... **DET. ENGLEFIELD:**

HARRISON: Eight - eight and a half months.

DET. ENGLEFIELD: Are you - ha- have you ever been with any other agency?

HARRISON: Back east I was a detention officer for Edgecombe County Sheriff.

DET. ENGLEFIELD: What - which county?

HARRISON: Edgecombe County...

DET. ENGLEFIELD: Where's that...

HARRISON: ...Sheriff's Department.

DET. ENGLEFIELD: ...at?

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POLICE

SACRAMENTO POLICE DEPARTMENT

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HARRISON: In North Carolina. Tarboro, North Carolina.

DET. ENGLEFIELD: Okay.

HARRISON: I wasn't in a sworn position though.

DET. ENGLEFIELD: Okay. So a custodial officer but non-sworn?

HARRISON: Right.

DET. ENGLEFIELD: Okay. How long were you doing that for?

HARRISON: Just a few months.

DET. ENGLEFIELD: Okay. So about three months?

HARRISON: Right. Well, about three - three to four months.

DET. ENGLEFIELD: Okay. so it's going to be a little bit.

HARRISON: Okay.

DET. ENGLEFIELD: H- how much training in terms of time where you given for that position?

HARRISON: Zero.

DET. ENGLEFIELD: Oh, really?

HARRISON: There was no training for it. We were just kind of put into that position. We were instructed that we would be going through training sometime later in the future but the ones who were there the longest were to get picked up first into the training.

DET. ENGLEFIELD: Okay.

HARRISON: But I wasn't - I wasn't there long enough to even get into the training. So...

DET. ENGLEFIELD: You - you were there for three months with no training?

HARRISON: Correct.

DET. ENGLEFIELD: Okay. And then you went through the Sacramento Police Academy?

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HARRISON: Correct.

DET. ENGLEFIELD: Okay. Well, how - how long was it - just if I can ask between the time gap

between when you left that position and when you got picked up for the Academy here in Sacramento?

HARRISON: Okay. With Edgecombe County I began work there in 2006 I believe.

DET. ENGLEFIELD: Oh, okay.

HARRISON: So it's been quite some time.

DET. ENGLEFIELD: Oh, okay.

HARRISON: Like maybe about 10 years.

DET. ENGLEFIELD: Okay.

HARRISON: Uh...

DET. ENGLEFIELD: Okay.

HARRISON: ...but I just got picked up with Sacramento January of last year.

Okay. And when did you start the Academy? DET. ENGLEFIELD:

HARRISON: January 4 of 2016.

DET. ENGLEFIELD: Okay. So silly question. Are you - are you still in - in phase training?

HARRISON: Yes, sir.

DET. ENGLEFIELD: Okay. So you haven't had any other assignments?

HARRISON: No. sir.

DET. ENGLEFIELD: Okay. U- p- were you - let me ask you. Prior to custodial officer were you ever

a sworn peace officer anywhere else?

HARRISON: No. sir.

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DET. ENGLEFIELD: Okay. And prior to any of this or in between that time were you - were you

ever in the military?

HARRISON: No. sir.

DET. ENGLEFIELD: Okay. Either - and you sort of answered the question but other than the Sac PD

standard, you know, training route -- and you said you had no training in North Carolina?

HARRISON: Correct.

DET. ENGLEFIELD: Any specialized training in between that time or sort of - outside of the

Sacramento Police Department - you know range master, anything like that?

N- not really specialty training. I went through Sierra College Academy for modular HARRISON: where we got a little bit of defensive tactics. That was back in 2013 I believe. It was the modular three portion of

the Police Academy.

DET. ENGLEFIELD: Of the...

HARRISON: Uh...

DET. ENGLEFIELD: ...of the post training?

HARRISON: Right.

DET. ENGLEFIELD: Okay.

HARRISON: It was an extended version which is supposed to last for about a year or so. But I only

completed Modular 3 because I just...

DET. ENGLEFIELD: Okay.

HARRISON: I decided to stop that and go to school full time.

DET. ENGLEFIELD: Okay. And - and that module - module consisted of what...

HARRISON: Not all demands - just a few of them. It consisted of defensive tactic as well.

DET. ENGLEFIELD: Okay. So a little bit of what we - what would - what in the Academy we called

ACB?

HARRISON: Correct.

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DET. ENGLEFIELD: Okay. A little bit of that?

HARRISON: V- very little bit of it though.

DET. ENGLEFIELD: Okay.

HARRISON: Very.

DET. ENGLEFIELD: Okay. So talking about today...

HARRISON: Okay.

DET. ENGLEFIELD: ...were you in uniform today?

HARRISON: Yes, sir.

DET. ENGLEFIELD: Okay.

Full uniform. HARRISON:

DET. ENGLEFIELD: The full uniform you're wearing right now?

HARRISON: I actually had a jacket on and a baseball cap.

DET. ENGLEFIELD: Okay.

HARRISON: Sacramento approved.

DET. ENGLEFIELD: Okay. And if you could - an- and I don't know if you still wearing your belt. If you could sort of -- you and you can stand up if you want to -- sort of describe your belt as you're going from the middle of your belt around to the right and behind and back around to the left just describe it for me.

HARRISON: Okay, so it'd be my handcuffs, my firearm, Glock 17, 9 millimeter. Back here is going to be my radio taser, baton, OC spray and my magazines.

DET. ENGLEFIELD: Okay. And how many handcuffs do you have on the...

HARRISON: Just one.

DET. ENGLEFIELD: Okay. And you have it looks like keys in between your...

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HARRISON: Oh, I'm sorry. Yes the handcuff key.

DET. ENGLEFIELD: Okay.

DET. ENGLEFIELD: And there's nothing between your gun and you said your radio?

Correct. It's - and... HARRISON:

DET. ENGLEFIELD: Okay.

HARRISON: ...I try to keep that full and I have a flashlight in my back pocket.

Okay. **DET. ENGLEFIELD:**

HARRISON: Flashlight in your pocket.

DET. ENGLEFIELD: And then your taser is between your radio and your baton?

HARRISON: Correct.

DET. ENGLEFIELD: And that's your standard X26 taser brand CED?

Correct. HARRISON:

Okay. Your - you know your baton size? DET. ENGLEFIELD:

HARRISON: I do- mind if I pull it out?

DET. ENGLEFIELD: Yeah, go ahead.

I don't think it's written on there but could be. I don't know. **DET. ENGLEFIELD:**

HARRISON: Nah, just my serial numbers here.

DET. ENGLEFIELD: Okay.

And you got a... DET. ENGLEFIELD:

HARRISON: ...belt.

DET. ENGLEFIELD: ...a pepper spray of the - the bigger size there?

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HARRISON: Let's see.

DET. ENGLEFIELD: Yeah, that's the large size. Okay, very good. And then just two - two

magazines of you said .9 millimeter.

HARRISON: Yes sir.

DET. ENGLEFIELD: Okay. Okay, you can have a seat. And then you're wearing your...

DET. ENGLEFIELD: ...its look - it looks like youre wearing your microphone on your upper left

what do they call that - epaulet?

Yes sir. HARRISON:

DET. ENGLEFIELD: Okay. And this is all the same as it was all day?

HARRISON: Yes, sir.

DET. ENGLEFIELD: Okay. And are you wearing your vest?

HARRISON: Yes, sir.

DET. ENGLEFIELD: Okay. And you - did you take your vest off at any time today?

No. No. HARRISON:

DET. ENGLEFIELD: Okay. So you say you're still in phase training?

Yes, sir. HARRISON:

DET. ENGLEFIELD: So how long have you been on this current team?

HARRISON: This current team coming up on a month now. This would be my - should be about my

fourth week here.

DET. ENGLEFIELD: Who's - and who's your supervisor on this team?

HARRISON: Sergeant Glenn

DET. ENGLEFIELD: Okay.

HARRISON: Two sam six.

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And that's - this is a - you're on - this is a day shift team? **DET. ENGLEFIELD:**

HARRISON: Yes sir.

Okay. And what are the days off on this team? DET. ENGLEFIELD:

HARRISON: The days off would be Thursday, Friday, Saturday.

DET. ENGLEFIELD: Okay. And so you've been on this team for about a month?

HARRISON: Yes, sir.

DET. ENGLEFIELD: Okay. And being in phase training does that mean you're not - you're not a solo

officer yet' You're - is that - is that correct?

HARRISON: Correct.

DET. ENGLEFIELD: Okay. And you are necessarily posted with a Field Training Officer?

HARRISON: Yes, sir.

Okay. And who's your Field Training Officer for - for right now? **DET. ENGLEFIELD:**

Today it was Officer or Corporal Cunningham. HARRISON:

DET. ENGLEFIELD: Okay.

HARRISON: But primarily it's Officer Goodpastor.

Okay. And were you with Officer Goodpastor for most of the previous month? **DET. ENGLEFIELD:**

Yes. HARRISON:

DET. ENGLEFIELD: Okay. And is there a reason that you're not with her today?

HARRISON: She's on she's

She's not here... **DET. ENGLEFIELD:**

HARRISON: Correct.

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DET. ENGLEFIELD: ...in other words?

HARRISON: Right.

DET. ENGLEFIELD: Okay. Have you worked with Officer Cunningham before as a partner?

No. sir. HARRISON:

DET. ENGLEFIELD: Okay.

HARRISON: Well we would come across each other in the same beat.

DET. ENGLEFIELD: Okay.

HARRISON: As far as being in the same car no.

DET. ENGLEFIELD: Okay. So you said you had Thursday, Friday, Saturday off?

HARRISON: Correct.

DET. ENGLEFIELD: So yesterday you worked?

HARRISON: Yes, sir.

Yesterday was your first day of the shift for that week? DET. ENGLEFIELD:

HARRISON: Yes, sir.

DET. ENGLEFIELD: Okay. How many hours did you work yesterday?

10 hours. HARRISON:

Okay. What time did you get off of shift yesterday? **DET. ENGLEFIELD:**

HARRISON: About 1600. I went in early though. Swing shift needed cars. So I hung out at the

station and studied a little bit.

Okay. DET. ENGLEFIELD:

HARRISON: Until it was time to go.

What time did you get to sleep last night? **DET. ENGLEFIELD:**

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HARRISON: I went to be- went to bed around I want to say 9 o?clock. maybe.

DET. ENGLEFIELD: Okay.

HARRISON: 8:30 - 9 o'clock..

DET. ENGLEFIELD: Okay. And what time did you get up this morning?

HARRISON: I got up about 5 o'clock. this morning.

DET. ENGLEFIELD: Okay. And about what time did you get to the station?

HARRISON: About 5:45 - 5:50. I was pushing it this morning.

DET. ENGLEFIELD: Okay. And so 9:00 - around 9:00 pm you went to sleep' Around 5 o'clock. you

went up' So for this month on day shift is that sort of your normal routine?

HARRISON: Yes sir.

DET. ENGLEFIELD: Is that how much sleep you got - you mo- you - you get for the most part?

Yes, sir. HARRISON:

DET. ENGLEFIELD: Okay. And what time did you - and you started at shift at what time this

morning?

HARRISON: 0600 hours.

DET. ENGLEFIELD: Okay. Prior to this incident was there anything of signci- significance that had

happened...

No. sir. HARRISON:

DET. ENGLEFIELD: ...on your shift?

HARRISON: No, sir.

DET. ENGLEFIELD: Okay. Make any arrests?

HARRISON: No. sir.

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DET. ENGLEFIELD: Okay. When you first heard this call or when you were advised of this call tell me - tell me how that happened.

HARRISON: I was on the corner of MLK and Broadway. I was in the Bank of America parking lot. Well, it's the old Bank of America. They shut down now. But I was in that parking lot there report writing from a 459 earlier in the day.

DET. ENGLEFIELD: Okay.

HARRISON: I heard a Code 3 cover come out. I go ahead and put the car in drive and I'm waiting for the location or whatever to respond. And it said it's on Alhambra so I activate my emergency lights and siren and I take off westbound down Broadway heading north on Alhambra.

DET. ENGLEFIELD: So you were driving?

HARRISON: Correct.

DET. ENGLEFIELD: Okay. And you said you heard a Code 3 cover call?

HARRISON: Yes, sir.

DET. ENGLEFIELD: Can you describe that - describe me - describe that to me in non-cop terms what you heard on the radio.

I need help right away - right now. HARRISON:

DET. ENGLEFIELD: Did you hear somebody say that on the radio?

No. HARRISON:

DET. ENGLEFIELD: Okay. So that's what I'm asking. It - what - what did you hear on the radio not in - in police code? What did you hear' What - what do you actually hear come over the radio?

HARRISON: What I actually heard was 'I need Code 3 cover.'

DET. ENGLEFIELD: Okay, so in other words the police officer said, 'Code 3 cover'?

HARRISON: Correct.

DET. ENGLEFIELD: Okay.

HARRISON: And it sounded like they were in a little bit of duress like something was going on...

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DET. ENGLEFIELD: Okay.

HARRISON: ...as they were saying it.

DET. ENGLEFIELD: Did you recognize -- at that time -- did you recognize at that time who that

officer was?

HARRISON: No.

DET. ENGLEFIELD: Okay. So you heard somebody get on the radio and say, 'Code 3 cover." Male

or female?

Male. HARRISON:

DET. ENGLEFIELD: Okay. Somebody gets on the radio and says, 'Code 3 cover." What's the next

thing that you hear?

HARRISON: I don't hear any- the location - I'm sorry.

DET. ENGLEFIELD: Okay.

HARRISON: I hear the location and they say it's at the Rite Aid off Alhambra. I believe the address -

I can't remember exactly what the address was.

DET. ENGLEFIELD: Just what you - just what you heard. If that's what they said - that's what

whoever on the radio said?

HARRISON: Right.

DET. ENGLEFIELD: So whoever got on the radio said, 'Code 3 cover,' and then someone later gave

out you said Rite Aid on Alhambra?

HARRISON: Yes.

DET. ENGLEFIELD: Okay.

HARRISON: 1100 Alhambra - 1121 Alhambra I believe the address was.

DET. ENGLEFIELD: Is that what they said or is - is that what...

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HARRISON: Correct. And then we later - my - my training officer I was with was Cunningham and she later advised me that it's going to be the Rite Aid up there. I'm not...

DET. ENGLEFIELD: Okay.

HARRISON: ...sure if she heard it because I was too busy or focused on driving so I'm not sure if she

heard it across the radio.

DET. ENGLEFIELD: Okay.

HARRISON: I didn't hear it. I just heard the address and I asked her if she could look up...

DET. ENGLEFIELD: Was it the same person that was - put out the Code 3 cover was the same

person that gave the address?

HARRISON: I ca- I don't know.

DET. ENGLEFIELD: Okay. So you said you went westbound on Broadway?

HARRISON: Correct.

DET. ENGLEFIELD: Headed toward that cover call?

HARRISON: Correct.

DET. ENGLEFIELD: You were driving in what manner?

HARRISON: I was driving in...

DET. ENGLEFIELD: Did you have your lights on?

HARRISON: Correct. I...

DET. ENGLEFIELD: Did you have your sirens on?

...and siren. Correct. HARRISON:

DET. ENGLEFIELD: Okay. Something - something we normally call Code 3?

HARRISON: Correct.

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DET. ENGLEFIELD:	Okay. So you're driving Code 3 towards that location. It - were you	ı having a
conversation at this point with Of	ficer Cunningham?	

HARRISON: Um...

Some type of communication? **DET. ENGLEFIELD:**

HARRISON: Yeah, there was communication. 'You're clear right. Keep going.' Make sure I clear the intersections. Things that relate to those or that.

DET. ENGLEFIELD: Okay. Was there any conversation as to what kind of call you were going to?

No. HARRISON:

DET. ENGLEFIELD: Okay.

HARRISON: I - I had no idea what we were going to. All I heard was, 'Code 3 cover.' And I'm just trying to get there as quickly as I can - quickly and safely as I can.

DET. ENGLEFIELD: Okay. And - and without sort of forecasting what you know now to have happened what were you thinking was going on when you were driving and you heard that cover call? Whawhat did you think might have been happening?

HARRISON: Someone was fighting or...

DET. ENGLEFIELD: Okay.

HARRISON: ...something. I - I knew an officer needed help. Something wasn't right. Maybe somebody's fighting with him or something. I don't know. I just knew I had to get there.

DET. ENGLEFIELD: B- bu- okay, but it - but you were thinking those things?

HARRISON: Right.

DET. ENGLEFIELD: Okay.

HARRISON: I knew it was an emergency. I knew that.

DET. ENGLEFIELD: Okay. So then what?

HARRISON: I Alhambra and continued northbound still activated lights and siren. I see the Rite Aid on my right hand side but just before we got to the Rite Aid my training partner was pointing to the right. Said,

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"They're over there. They're over there.? I was like, 'Okay." So they're across the street from the Rite Aid. So I end up pulling in the I guess north side of Rite Aid. She says, 'Let me out. Let me out.' I let her out. She takes off running south towards the Sutter Urgent Care Building that they were in. I parked the car more towards the right so I can get out of the street. I get out. Then I run after her as well so...

DET. ENGLEFIELD: Okay.

HARRISON: ...I can get in there and find out where they are.

DET. ENGLEFIELD: So I'm going to show you - I'm going to show you a map. It's sort of a semi view. Orient yourself here if you want. Um...

HARRISON: Okay, yeah this is Rite Aid. Okay. I'm parked right here on s...

DET. ENGLEFIELD: So if this is Alhambra.

HARRISON: Correct.

DET. ENGLEFIELD: Got the Jamba Juice there. Rite Aid here. Do you remember which direction

you were coming from?

HARRISON: Okay, I was coming this way up north or I'm sorry north of Alhambra.

DET. ENGLEFIELD: Okay.

HARRISON: She spots them I believe right here on L Street.

DET. ENGLEFIELD: Did you see them or did she spot...

HARRISON: I saw them at the last minute.

DET. ENGLEFIELD: Okay.

HARRISON: When she was like, 'Over there. Over there.' And I - and I look -- because I'm still trying to focus on the road -- and I see lights and a car pointed or right in front of the building. So I was like, 'Okay." So I turned right.

DET. ENGLEFIELD: You - you got a pen?

HARRISON: Yes.

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DET. ENGLEFIELD:	Could you put an X for me where you - you saw the lights and - and yo	u said -
you said you saw a police	r over som- over there somewhere?	

HARRISON: Yes sir.

DET. ENGLEFIELD: Where did you - put an...

HARRISON: Um...

DET. ENGLEFIELD: ...X where you saw that police car.

HARRISON: ...it was somewhere around in this area.

HARRISON: Yeah it was - it was somewhere in this area here.

DET. ENGLEFIELD: Okay.

HARRISON: I don't know exactly - the exact spot.

DET. ENGLEFIELD: Okay. You - you sort of drew two X's. Is that one police car or...

HARRISON: I just remember...

DET. ENGLEFIELD: ...did you see...

...seeing one. HARRISON:

DET. ENGLEFIELD: You saw - okay. So then where did you go?

HARRISON: I ended up going to Alhambra then I turned right...

DET. ENGLEFIELD: Okay.

HARRISON: ...here. I let her out somewhere along here.

DET. ENGLEFIELD: Put an X just sort of...

HARRISON: Okay.

DET. ENGLEFIELD: ...generally where you thought you let her out at. Okay.

HARRISON: Around there. And then I parked.

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DET. ENGLEFIELD: And then where did you see her go?

HARRISON: She went south.

DET. ENGLEFIELD: Okay.

HARRISON: And through the parking lot to the front of this building here.

DET. ENGLEFIELD: Okay. And then where did - where - where do you go?

HARRISON: I went the same direction. And then I actually...

So - so back up. So you're in your car driving this way? **DET. ENGLEFIELD:**

HARRISON: Right.

And she's on foot? **DET. ENGLEFIELD:**

HARRISON: She's on foot.

DET. ENGLEFIELD: So what do you do next?

HARRISON: I I park the car and I get out...

DET. ENGLEFIELD: Okay.

HARRISON: ...and started running. I parked the car and I get out and then I take off running across

the parking lot.

DET. ENGLEFIELD: Where do you park?

HARRISON: Somewhere around here.

same direction?

DET. ENGLEFIELD:

Okay, just put an X. Okay. And then so you - you basically followed her in the

HARRISON: Correct.

DET. ENGLEFIELD: Okay. And then what happened?

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HARRISON:	I was - as I was running through the parking lot she - I lost sight of her. Citizens were
outside pointing,	They're over there. They're over there.' So that's when I run into the building. Then I run to the
hallway.	

DET. ENGLEFIELD: And by the building we're talking about this - this medical clinic?

Correct. HARRISON:

DET. ENGLEFIELD: Okay.

HARRISON: Yeah, the front entrance's up here.

DET. ENGLEFIELD: Okay. So you saw people pointing you in that direction?

HARRISON: Yes.

DET. ENGLEFIELD: So in between - let's say in between the time where you got on Alhambra and were heading north - in between that time and the time you entered the building did you hear any further radio traffic?

HARRISON: I don't know. I - I think I may have heard another, 'Code 3 cover.' I'm not entirely sure.

DET. ENGLEFIELD: Okay. Did you have any - any other conversation with Officer Cunningham as to what exactly is going on?

HARRISON: No.

DET. ENGLEFIELD: Okay. So you run into the building. Then what?

HARRISON: I see an employee and I - I believe I asked her, 'Where are they?' And she's like pointing around the corner. So I turned right down the hall, then I make another left, then I make another right then I see everybody on the floor in the middle...

DET. ENGLEFIELD: So...

HARRISON: ...of the hallway.

So you run down that hallway. DET. ENGLEFIELD:

HARRISON: Right.

DET. ENGLEFIELD: And you said you made a right and a left and a right.

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HARRISON: Right.

DET. ENGLEFIELD: So you're standing there. You're looking down - and the first thing - what what is it that you see when you s- you said you saw everybody who - what is it that you saw?

HARRISON: I saw Cunningham. She was down towards his legs. I don't know who was at the top of this person that they were on top of or who was at the lower half but I just saw two other officers right there.

DET. ENGLEFIELD: So describe to me where this person was. Who - who was that person?

HARRISON: Um I have yet to get his name but he was the suspect that was...

DET. ENGLEFIELD: What did he look like to you at that point?

HARRISON: I couldn't even see his face. All I saw was his jeans.

DET. ENGLEFIELD: Do you know what color jeans he had on?

I believe it was blue jeans he had on. HARRISON:

DET. ENGLEFIELD: Okay. So you see a suspect with blue jeans. Describe to me that - well how

that person was situated.

He was face down. HARRISON:

DET. ENGLEFIELD: If you want to draw both a diagram and you - if you...

HARRISON: Okay.

DET. ENGLEFIELD: If you feel like it. You don't have to.

HARRISON: Okay. He was face down. There was - there was another door. Okay, so there's like this long hallway. Then there's like a -- I don't know what you call it -- almost like a - it's another door but it's further

back in the hall. Almost like a - not a hole but it's another like a doorway or some sort.

DET. ENGLEFIELD: Okay.

HARRISON: And I see them down there. He's like face down. My training officer, uh...

DET. ENGLEFIELD: You - you see and where the - ca- I'm going to call him the suspect from this point forward. You see the s- who - who later on we're going to id- you identify him as the suspect.

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Correct. HARRISON:

DET. ENGLEFIELD:

their back?

You see this person and they're - they're - he's - they're on their stomach or on

Stomach. HARRISON:

DET. ENGLEFIELD: They're on the stomach and all you see is the feet?

HARRISON: Correct.

DET. ENGLEFIELD: The legs?

HARRISON: The legs.

DET. ENGLEFIELD: Okay.

HARRISON: So I do what I can. I'm just trying to get in there and do what I can to help.

DET. ENGLEFIELD: So when you turn the corner and you see this - you see the suspect face down

and you see legs where's Officer Cunningham?

HARRISON: She's down by his legs.

DET. ENGLEFIELD: Okay. And what is she doing?

HARRISON: I believe she was trying to - I - I'm not sure if he was trying to kick someone or

continue to kicking or not but I think she was just trying to keep him still so he wouldn't kick anymore.

Okay so what was she doing? Was she - how - how was she doing that? **DET. ENGLEFIELD:**

HARRISON: The fact that she was just down there by his legs.

DET. ENGLEFIELD: Was she touching him with her hands?

HARRISON: I can't remember...

DET. ENGLEFIELD: Okay.

HARRISON: ...if she was touching him with her hands or not.

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DET. ENGLEFIELD: Okay.

HARRISON: So I kind of get in there and...

DET. ENGLEFIELD: Let's - let's back up before you do that.

HARRISON: Okay.

Besides Officer Cunningham who else was there? DET. ENGLEFIELD:

At that time I didn't know. Everybody's back was towards me so I wasn?t sure... HARRISON:

DET. ENGLEFIELD: How many other officers did you see?

HARRISON: I saw I believe two. Yeah, I think I remember seeing two other officers on top of him.

Okay. Do you remember at all - did you see faces or... **DET. ENGLEFIELD:**

HARRISON: No, everybody was facing the other direction.

DET. ENGLEFIELD: Okay.

HARRISON: I don't know who was where. But later on I find out who they are because I get a...

Only what - only what you saw. DET. ENGLEFIELD:

HARRISON: Okay.

DET. ENGLEFIELD: So you see some other officers there. You can't - you can't describe them. Sac

PD?

HARRISON: Correct. They were Sac PD officers.

DET. ENGLEFIELD: Okay. And you see Officer Cunningham by the feet but you're not quite sure

what she's doing?

HARRISON: Right.

DET. ENGLEFIELD: Okay. So you get closer and then what?

HARRISON: Then I kneel down.

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DET. ENGLEFIELD: Where?

HARRISON: And - down by his feet...

DET. ENGLEFIELD: Okay.

HARRISON: ...to try to help out. She look like she was kind of tired so I said, you know, 'I relieve you.' And I kind of crossed his legs in a way so he won't start kicking because he was still a little bit resistant at that point.

DET. ENGLEFIELD: Okay.

HARRISON: And so I said, 'I got him. I got him.' And at that point she stands up and she backs up. And I just kind of hold him there - hold his legs there.

DET. ENGLEFIELD: What was her demeanor when you went up to her?

HARRISON: She was - I mean she was okay. She wasn't overly stressed out or anything like that. Maybe a little tired but she was - she was fine.

DET. ENGLEFIELD: Okay. And so you took control of the - this person's feet?

HARRISON: Correct.

What did you do? DET. ENGLEFIELD:

HARRISON: I crossed his legs. I took his right and - his right leg crossed it over his left leg and just lifted his left leg over his right.

DET. ENGLEFIELD: Okay. So you...

HARRISON: It kind of naturally falls that way.

DET. ENGLEFIELD: Yes.

HARRISON: So I laid across and I just hold him like that.

DET. ENGLEFIELD: Okay. So you - you were pinning his - you were attempting to pin his right foot

behind his left knee?

HARRISON: Correct.

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DET. ENGLEFIELD: Okay.

HARRISON: And I just held him there.

DET. ENGLEFIELD: Could you - could you tell the - the demeanor of any other officer that was

around at that point?

HARRISON: They were just trying to keep him detained.

DET. ENGLEFIELD: What's - what kind of sh- condition were they in if you - if you remember?

HARRISON: Um...

Or if you - if you even saw that. DET. ENGLEFIELD:

HARRISON: ...I believe I saw one officer on the suspect's back and the other officer maybe around

the waist area.

So let's talk about the one around the waist. This officer that was around the **DET. ENGLEFIELD:**

waist wh- specifically what's this officer doing?

HARRISON: I can't - you know I don't know.

DET. ENGLEFIELD: Okay.

HARRISON: He was just on top of him that way.

DET. ENGLEFIELD: Okay.

HARRISON: I believe. Excuse me.

DET. ENGLEFIELD: Does it - does that mean that he was - w- was he kneeling on him? Was it - this

officer sitting on him? Was he using his hands on him? Could you - could you determine that?

HARRISON: Probably a little bit of both. Just kneeling on him just...

DET. ENGLEFIELD: Okay.

HARRISON: ...trying to keep him stationary right there.

DET. ENGLEFIELD: So there was an officer sort of near the waist kneeling on this suspect with his

knees on the suspect's waist?

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DET. ENGLEFIELD: Okay. And you don't remember which officer that was?

HARRISON: I don't remember.

DET. ENGLEFIELD: Okay. You said there was another officer near - there was another officer?

Correct. HARRISON:

DET. ENGLEFIELD: And where was that...

HARRISON: Uh...

...officer? **DET. ENGLEFIELD:**

HARRISON: ...more towards the upper body.

DET. ENGLEFIELD: Okay. And what was that officer doing?

HARRISON: Actually like he was kneeling as well. Almost if he - as if he was doing the prone position when you cuff someone. You have I guess a knee on each side of their shoulder blade like we were trained in ACB.

DET. ENGLEFIELD: Okay.

HARRISON: And - and I - I assume that's how he cuffed him was that way.

DET. ENGLEFIELD: So - so I understand it. The officer that was more towards the back - that officer also had a knee on the suspect?

HARRISON: Right.

DET. ENGLEFIELD: Okay. Do you remember which knee?

HARRISON: No.

DET. ENGLEFIELD: Okay. Do you remember either their s- either of these - of these two officers what they were doing with their hands?

HARRISON: No.

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DET. ENGLEFIELD: Okay. What was the demeanor if you could recall or if you could see of the

suspect?

HARRISON: He was a little bit resistant. He was just kind of yelling out just, 'Ah, ah'. And I didn't

even really make out anything that he was saying.

DET. ENGLEFIELD: So he was yelling things?

HARRISON: Right.

DET. ENGLEFIELD: Can you describe anything he was doing physically?

HARRISON: He was trying to get out of it but then he - all of a sudden he just kind of gave up and...

DET. ENGLEFIELD: Okay.

HARRISON: ...he just complied after that.

Was there - when you arrived and you saw the other two officers one near his **DET. ENGLEFIELD:** waist, one near his back and Officer Cunningham at the feet did you see anybody use a - use a CED, use a baton

or any other type of u- use of force?

HARRISON: No.

DET. ENGLEFIELD: Was there any attempt to control his feet through any other means?

HARRISON: No.

DET. ENGLEFIELD: Okay.

HARRISON: Well actually someone mentioned if I - they had a hobble. Which is something that you use to tie up their feet. I got it out but I - I didn't need to use it. I had pretty good grip on him and a pretty good

hold of him so I didn't even need to use it.

DET. ENGLEFIELD: Okay. So what happened to the hobble after...

HARRISON: It just fell on the floor somewhere and someone picked...

DET. ENGLEFIELD: Okay.

HARRISON: ...it up.

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DET. ENGLEFIELD:	Okay. So - so it sounds - it sounds like you - you sort of relieved Officer
Cunningham at the feet and yo	did the thing where you

HARRISON: Right.

DET. ENGLEFIELD: ...fold over one leg at a - at a 90 and fold the other leg on top?

HARRISON: Yes.

And you said the suspect was still at that point making noises? **DET. ENGLEFIELD:**

HARRISON: Right.

DET. ENGLEFIELD: What - what did - what would - in your mind what did you think about this suspect? What were you thoughts about this guy on the floor?

My thoughts about him is, Why is he resisting? What's going on? Because I had no idea HARRISON: what was going on, what happened, what started this. I had no clue. I'm just trying to figure out, 'Okay, what's going on with this guy?' Like, 'Why is he...'

DET. ENGLEFIELD: What did you think about his condition? Was - was there anything specific about his condition that jumped out at you?

No. HARRISON:

DET. ENGLEFIELD: Okay. Uh...

I don't think so. HARRISON:

DET. ENGLEFIELD: Okay. And you said he was - he was yelling?

HARRISON: Yes just - I couldn't make out what he was saying. Just more of, 'Ah, ah.' That's - that's all I remember hearing from him.

And did I - I - anything with his - with his body other than - what was he doing **DET. ENGLEFIELD:** with his body? If he was yelling what was he doing with his body?

HARRISON: It's almost like he was trying to get loose.

DET. ENGLEFIELD: Okay.

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HARRISON: But he ended up - I - I guess he was just wearing himself out and he just kind of just

stopped and gave in.

DET. ENGLEFIELD: Okay, so you relieve Officer Cunningham. There's two officers - one at his

waist and one at his back. Then what happens?

HARRISON: And then I believe Officer - Corporal Paiz walks up and he kind of takes control. He's

almost standing...

DET. ENGLEFIELD: Let me back up. You say he walks up. Did you see him arrive or...

HARRISON: I didn't physically see him walk through the door. I kind of looked over my shoulder

and I saw him walking up.

DET. ENGLEFIELD: Okay.

HARRISON: And he kind of ju- gets in and try to do what he can do and...

DET. ENGLEFIELD: Okay.

HARRISON: ...he kind of took control of that leg area then he relieved me and then I got up.

DET. ENGLEFIELD: So - so Corporal Paiz came up and he relieved you...

Correct. HARRISON:

DET. ENGLEFIELD: ...of the leg area?

HARRISON: Right.

DET. ENGLEFIELD: Okay.

HARRISON: He more I kept the legs the same way.

DET. ENGLEFIELD: Okay.

HARRISON: But he kind of had his knee up against where my hands were.

DET. ENGLEFIELD: Okay.

HARRISON: And he just kind of held him that way.

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DET. ENGLEFIELD: Okay.

HARRISON: And I believe he had his - I want to say maybe his left hand on his back or something

like that. I don't remember.

DET. ENGLEFIELD: So what - what did the other two officers do when Corporal Paiz came up and

assisted you with the legs?

I don't remember. I'm not sure if they got relieved or not because I remember hearing HARRISON: someone say, 'Hey, do you need relief,' or something like that. And I just don't remember if someone new stepped

in or not.

DET. ENGLEFIELD: Was that somebody asking you or somebody asking Corporal Paiz or...

HARRISON: They were - they were going around to all of asking did we need relief.

DET. ENGLEFIELD: Okay.

HARRISON: Um...

DET. ENGLEFIELD: Do you remember who it was that was doing the asking?

No I don't. HARRISON:

DET. ENGLEFIELD: Okay.

HARRISON: I was too focused on making sure this guy's not going to try to stand back up or

anything like that.

DET. ENGLEFIELD: Okay. So Corporal Paiz is there. Do you remember who else was there besides

him that has hands on - on the guy at this point?

HARRISON: Officer Donnell.

DET. ENGLEFIELD: Officer who?

HARRISON: Donnell. I remember seeing him there and that was it.

DET. ENGLEFIELD: Okay. Is Donnell first name or last name?

HARRISON: It's last name.

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DET. ENGLEFIELD: Okay. Where was Officer Donnell?

HARRISON: He was also at the feet area - the suspect's feet.

DET. ENGLEFIELD: So both Corporal Paiz and Officer Donnell are there?

Yes. HARRISON:

DET. ENGLEFIELD: Okay. Then what happens?

HARRISON: And then I get up because Officer Paiz has control and I believe Officer Donnell got up

as well.

DET. ENGLEFIELD: Do you remember anybody else there besides Corporal Paiz and Officer

Donnell when you got up and left his - and left his legs?

Officer Boris which is Officer Donnell's trainee. I saw him further down the hall. HARRISON:

DET. ENGLEFIELD: Okay.

HARRISON: And that's when I was walking out to go get the car that was parked outside of Rite Aid, brought it around to the front of the Ser- the Sutter Health Center and then I started trying to find witnesses.

DET. ENGLEFIELD: When you were basically relieved at that point by - by Corporal Paiz what was

the state of this guy's hands? Was he in handcuffs? Was he not in handcuffs? Do you remember?

I believe I saw him cuffed behind his back. HARRISON:

DET. ENGLEFIELD: Okay. Do you remember when that happened?

HARRISON: No.

DET. ENGLEFIELD: Okay.

HARRISON: I didn't - when I got there I didn't see anyone cuff him so I assumed that he was already

cuffed by the time I got there.

DET. ENGLEFIELD: Okay. But you didn't see handcuffs go on?

HARRISON: I didn't see handcuffs go on.

DET. ENGLEFIELD: Okay. But at some point in this whole evolution you realize he is handcuffed?

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HARRISON: Right.

DET. ENGLEFIELD: Okay. When at any time after you saw him handcuffed was there anybody do -

di- did - did anybody use any type of force by means of a taser...

HARRISON: No.

...or baton or anything like that? DET. ENGLEFIELD:

HARRISON: No.

DET. ENGLEFIELD: Okay. So after this point he's handcuffed y- at some point. You're relieved by

Officer Paiz and where do you go?

HARRISON: I go back out to the main lo- or I go back outside to go get the car that I parked outside

of Rite Aid, drive around and pull it in the front of the health center.

DET. ENGLEFIELD: By the time you walk out to the car do you remember all the officers that are

there?

HARRISON: No. I just saw Officer Boris when I was walking out to the main entrance.

DET. ENGLEFIELD: Okay.

DET. ENGLEFIELD: You walk out, you go get the car and then what?

HARRISON: And then I started looking for witnesses and I block off the hallway as I was instructed

to do.

Okay. All right. When you left to go out to get the car to move it what position **DET. ENGLEFIELD:**

was the suspect in?

HARRISON: He was still face down on his stomach.

Handcuffed? DET. ENGLEFIELD:

HARRISON: Correct.

DET. ENGLEFIELD: And hands behind his back?

HARRISON: Correct.

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Okay. Okay, I'm going to go out and talk to some people. DET. ENGLEFIELD:

Okay. HARRISON:

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Related Text Page(s)

Document: 02 WITNESS STATEMENT

Author: 3170 - ENGLEFIELD, ASHLEY 0563 (

Subject: OFFICER CUNNINGHAM Related date/time: Mar-17-2017 (Fri.) 1636

On 3-6-17 at about 2249 HRS I interviewed OFC Cunningham #496 inside interview room #6 at SPD headquarters. OFC Cunningham's SPOA representative, Jeff Edwards (Mastagni Holstedt) was also present. The interview was video recorded and later booked into evidence under SPD PR# 948810-001. The following transcript is not a word for word interpretation of the video recording. The transcription contains the relevant content of the interview. For exact detail please refer to the recording. The following interview took place:

DET. ENGLEFIELD: Okay. Full name and badge?

OFFICER CUNNINGHAM: Officer Allison Cunningh496.

DET. ENGLEFIELD: And how long have you been with Sac PD?

OFFICER CUNNINGHAM: Ten years sworn.

DET. ENGLEFIELD: You worked in - anywhere else before that?

OFFICER CUNNINGHAM: Uh...

DET. ENGLEFIELD: As a - as a sworn?

OFFICER CUNNINGHAM: No.

DET. ENGLEFIELD: Okay. What's your current assignment right now?

OFFICER CUNNINGHAM: Patrol east, days.

DET. ENGLEFIELD: Other than patrol have you worked any other assignments?

OFFICER CUNNINGHAM: I was light duty investigations twice, (TDY) to (ABC) for a short time.

And then (TDY) to (C-Set), I think it was. Yeah. And (RT) -- I was TDY to RT.

DET. ENGLEFIELD: How long were you (TDY) to (ABC)?

OFFICER CUNNINGHAM: That was, like, two weeks.

DET. ENGLEFIELD: And (C-Set)?

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OFFICER CUNNINGHAM: Three months.

DET. ENGLEFIELD: And (RT)?

OFFICER CUNNINGHAM: Three months.

DET. ENGLEFIELD: Within the department are you, um - do you have any special or certifications

or, um...

OFFICER CUNNINGHAM: Like...

DET. ENGLEFIELD: ...like - like range master or anything like that?

OFFICER CUNNINGHAM: I'm a CPR instructor for the department for CPR, first aid.

So then CPR instructor, first aid, you're - have you been given any specialized **DET. ENGLEFIELD:**

training? Like, if you're not certified in specialized training other than the CPR and first aid?

OFFICER CUNNINGHAM: No. I'm just certified to teach it at post. That's it.

DET. ENGLEFIELD: Okay. Okay. But not - you haven't been to the rifle school or any of the...

OFFICER CUNNINGHAM: No.

DET. ENGLEFIELD: Okay. All right. Before the police department were you in the military at all?

No. **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: Okay. So this, uh - this afternoon when you respond to this call were - were

you wearing the same uniform as you are right now?

OFFICER CUNNINGHAM: Yes, I was.

DET. ENGLEFIELD: Okay. And can you describe to me -- and if you want to stand up to figure out

that's - that's cool or if that's fine -- so - so staring in the middle of your belt and s- and going from your right

hand all the way back around, can you sort of describe what's on your belt?

Uh... OFFICER CUNNINGHAM:

DET. ENGLEFIELD:

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POLICE

SACRAMENTO POLICE DEPARTMENT

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OFFICER CUNNINGHAM: ...I have, like, two magazines...

DET. ENGLEFIELD: Uh-huh.

OFFICER CUNNINGHAM: ...my gun, my extra keys, my cuffs. What's right here? My flashlight,

pepper spray, radio, baton, taser, mic.

DET. ENGLEFIELD: Okay. Your radio?

OFFICER CUNNINGHAM: Yes.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: It's before my baton.

DET. ENGLEFIELD: Okay. Your - your piston would, uh - which - which kind of pistol is that?

OFFICER CUNNINGHAM: P226.

DET. ENGLEFIELD: And you - two rounds for that one and one in - actually in the pistol? Oh, I'm

sorry, two magazines and then one magazine in the pistol?

OFFICER CUNNINGHAM: Yes.

DET. ENGLEFIELD: Okay. Pepper spray -- did you say...

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: ...you had pepper spray on there?

OFFICER CUNNINGHAM: Yeah. Mm-hm.

DET. ENGLEFIELD: Full size one, bigger?

OFFICER CUNNINGHAM: The big one.

DET. ENGLEFIELD: All right.

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: And then there was a between your - okay. You've got a...

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SACRAMENTO POLICE DEPARTMENT

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OFFICER CUNNINGHAM:

So flashlight, pepper spray, radio, taser - I'm sorry, baton, taser, and my

mic.

DET. ENGLEFIELD:

You know what size of baton that is just by the way?

OFFICER CUNNINGHAM:

Like, the - I don't know.

DET. ENGLEFIELD:

You don't...

DET. ENGLEFIELD:

There were. Taser's here. It's a standard X26?

OFFICER CUNNINGHAM:

Yeah.

DET. ENGLEFIELD:

Okay. So basically your taser and your belt buckle you've also - your taser

you've also got a - just a place for your mic...

OFFICER CUNNINGHAM:

Yeah.

DET. ENGLEFIELD:

...for your in car camera?

OFFICER CUNNINGHAM:

Yeah.

DET. ENGLEFIELD:

Okay.

OFFICER CUNNINGHAM:

And that's it. I don't know if...

DET. ENGLEFIELD:

Okay. And silly question -- you were wearing your ...

OFFICER CUNNINGHAM:

Yes.

DET. ENGLEFIELD:

...all day today?

OFFICER CUNNINGHAM:

Yeah.

DET. ENGLEFIELD:

Didn't take it off?

OFFICER CUNNINGHAM:

No.

DET. ENGLEFIELD:

All right. And that being said, what - what shift did you work today?

OFFICER CUNNINGHAM:

Day shift. Excuse me.

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DET. ENGLEFIELD: Okay. And what time - what time did, uh - did you start?

OFFICER CUNNINGHAM: 6:00 am.

DET. ENGLEFIELD: And what is your, uh - is that your normal shift?

Yes. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Okay. And what are your days off? Uh...

OFFICER CUNNINGHAM: Thursday, Friday, Saturday.

Okay. So you can - you worked - did you work yesterday? DET. ENGLEFIELD:

Man:

Yes. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Okay. So this is your second work day in the week?

OFFICER CUNNINGHAM: Yes.

Okay. How long have you worked day shift? **DET. ENGLEFIELD:**

OFFICER CUNNINGHAM: A little over a year this time. Well back on day shift since 2014.

DET. ENGLEFIELD: Uh...

I... OFFICER CUNNINGHAM:

...normally days off? DET. ENGLEFIELD:

Yes. **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Light duty.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: You know?

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DET. ENGLEFIELD: Are you an FTO?

OFFICER CUNNINGHAM: Yes.

And today you - were you working with a partner? **DET. ENGLEFIELD:**

Yes. **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: How often do you work with a partner?

OFFICER CUNNINGHAM: Lately not that often. But probably, I mean - well I haven't a - a trainee

for myself in a few months. But...

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: ...I've been shadowing quite a bit. And if somebody's not there I take

them.

DET. ENGLEFIELD: How many, uh - how many days have you had this current partner?

OFFICER CUNNINGHAM: Today's the only day.

So this is your first day with this - with this new partner... **DET. ENGLEFIELD:**

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: ...with your new trainee?

OFFICER CUNNINGHAM: No. He's another officer's trainee. I just have him today because that

person's not here.

DET. ENGLEFIELD: Okay. Prior to him how long have you had a - or how long has the break you

had between trainees?

OFFICER CUNNINGHAM: It's been probably two months. But I've had three shadows...

DET. ENGLEFIELD: Talking about...

OFFICER CUNNINGHAM: ...in there.

DET. ENGLEFIELD: What - yesterday, which would've been Sunday...

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OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: ...do you remember what time you got off your shift?

OFFICER CUNNINGHAM:

Yeah. Well we had to come back early because we didn't have a car.

So, like, 3:00.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And then...

DET. ENGLEFIELD: So you get back to the station about 3:00?

Yeah. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Okay. And did you s- how much sleep - sleep did you have last night?

OFFICER CUNNINGHAM: I went to bed at 8:15. So...

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: ...I didn't...

DET. ENGLEFIELD: What - what time did you get up this morning?

OFFICER CUNNINGHAM: 4:45.

DET. ENGLEFIELD: Okay. Is that a nor- normal time for you?

OFFICER CUNNINGHAM: Yes.

DET. ENGLEFIELD: Okay. Is that a normal amount of sleep for you?

OFFICER CUNNINGHAM: Yes.

Okay. So what time did you get into - you work at Richards? DET. ENGLEFIELD:

Mm-hm. **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: What time did you get into Richards?

This morning? **OFFICER CUNNINGHAM:**

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DET. ENGLEFIELD: Yes.

OFFICER CUNNINGHAM: Probably about 5:40, 5:45, I guess.

DET. ENGLEFIELD: Okay. So what time do you normally, uh - would - would you normally get off

if - if there weren't enough - if there were enough cars? What time do you normally get off?

OFFICER CUNNINGHAM: I log off at 3:45.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: Prior to this call...

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: ...I mean, have you been dispatched or experienced any other significant call

during the, uh - during the day shift?

OFFICER CUNNINGHAM: You mean today?

DET. ENGLEFIELD: Yes.

OFFICER CUNNINGHAM: No.

DET. ENGLEFIELD: Okay. R- routine run of the mill type stuff?

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Slow actually.

DET. ENGLEFIELD: Any - any, uh - other arrests?

OFFICER CUNNINGHAM: No.

DET. ENGLEFIELD: Okay. When did you first hear of this call?

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OFFICER CUNNINGHAM: When Officer Villegas got on the radio and said something. I didn't understand it. I didn't even know he was on, we were 907. And then 30 seconds went by, they tried to raise him. He didn't answer. And then Officer Deon got on the radio and said something about cover.

DET. ENGLEFIELD: Okay. And where were you when this thing happened - when - when you heard

Villegas on the radio and 30 seconds later you heard Deon on the radio -- where were you?

OFFICER CUNNINGHAM: Broadway and MLK parked in the B of A parking lot.

DET. ENGLEFIELD: So...

OFFICER CUNNINGHAM: The old B of A -- so across from Martin Luther.

DET. ENGLEFIELD: Oh, okay. That's not a - that's not a B of A anymore?

OFFICER CUNNINGHAM: It's closed.

DET. ENGLEFIELD: Okay. And so tell me - tell me what happened, uh - tell me what happened

after that.

OFFICER CUNNINGHAM: We responded code 3 down Broadway to Alhambra. We got to L and Alhambra and I saw their cars on the right but he couldn't get over because of the traffic. So he - basically what...

S- so let me back up and ask you questions. Were you driving or was your DET. ENGLEFIELD:

partner driving?

OFFICER CUNNINGHAM: My partner was driving.

And what's his name? **DET. ENGLEFIELD:**

Robert Harrison OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Okay. So your partner was driving.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: And do you guys - you said you go code 3?

OFFICER CUNNINGHAM: Yes, he did.

DET. ENGLEFIELD: Okay.

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OFFICER CUNNINGHAM: Lights and siren, yeah.

DET. ENGLEFIELD: Lights and sirens?

OFFICER CUNNINGHAM: Yes.

DET. ENGLEFIELD: Okay. And so you got to, you said, Alhambra and L Street?

OFFICER CUNNINGHAM: Yeah. And I saw the - their cars in the parking lot of Rite Aid. Because

I knew he went to Rite Aid because of the address.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: He...

JEFF EDWARDS: Do you mean other police cars?

OFFICER CUNNINGHAM: Yes, police vehicles. The lights were - I saw lights in the corner of my

eye.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: They were at - they were overhead lights.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Or at least one of them did because I saw. And then we went to Granada, which is the next street. You know, I - I told him to let me out. And then I got out and ran to the parking lot of Rite Aid. And the security guards at the center building where they ended up being in were waiving me down saying,

'They're in there.' And they directed me - gave me directions to where they were.

DET. ENGLEFIELD: So I'm going to show you a map here.

OFFICER CUNNINGHAM: Mm-hm. Kind of.

DET. ENGLEFIELD: Yeah - yeah.

OFFICER CUNNINGHAM: Sorry.

So that's - that's Alhambra? **DET. ENGLEFIELD:**

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OFFICER CUNNINGHAM: Mm-hm.

And that's L Street? **DET. ENGLEFIELD:**

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: So you came up...

OFFICER CUNNINGHAM: Northbound.

DET. ENGLEFIELD: ...northbound on Alhambra...

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: ...towards L.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: And then you said at some point you - you said you couldn't go to L Street

because you saw the officers' cars?

OFFICER CUNNINGHAM: No. So their cars were somewhere, like, right here.

DET. ENGLEFIELD: Can you draw a - maybe an X where you saw...

OFFICER CUNNINGHAM: I saw two...

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: ...right there. And we were driving here but there was traffic. Like, you

couldn't really get over.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: So we just...

DET. ENGLEFIELD: So there was - there was traffic on L Street at Alhambra.

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: Okay.

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And the intersection there's some kind of box truck here. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: So we went around it and then turned back east on Granada. And I had

him let me out here. And I ran that way.

DET. ENGLEFIELD: Okay. When you drove by did you see the - did you see officers there or just

the, uh...

OFFICER CUNNINGHAM: Just the vehicles.

DET. ENGLEFIELD: ...the vehicles? All right.

OFFICER CUNNINGHAM: Just vehicles.

DET. ENGLEFIELD: And were their lights and sirens - were their lights on?

OFFICER CUNNINGHAM: I saw one of them had their lights on because that's what drew my

attention. I saw...

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: ...it out of the corner of my eye.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: So you're - you're going to the parking lot.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: And then do you know what Harrison is doing at this point as you're going

through the parking lot?

OFFICER CUNNINGHAM: No.

DET. ENGLEFIELD: Okay. Where - when do you next see Harrison? Harrison, right?

OFFICER CUNNINGHAM: Yes.

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DET. ENGLEFIELD: When...

OFFICER CUNNINGHAM: Not until I'm inside and I'm with Villegas, Deon, and .

DET. ENGLEFIELD: All right. So you went through here. And...

Mm-hm. **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: ...you said something about a security guard.

OFFICER CUNNINGHAM: Yeah. There was some - like, a security guard too right here at - see

where the arrows are at the entrance to the...

If you want to put an X there you can. DET. ENGLEFIELD:

OFFICER CUNNINGHAM: ...yeah, medical facility.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And...

DET. ENGLEFIELD: One of them or two?

OFFICER CUNNINGHAM: I think...

DET. ENGLEFIELD: If you remember.

OFFICER CUNNINGHAM: ...I think it was two. There was - there was at least two people standing

there.

DET. ENGLEFIELD: Okay.

So he let me out somewhere, like, here. And I ran this way because I - I **OFFICER CUNNINGHAM:** thought maybe they were going to wait by their cars. And as I got to here I looked up and they were, like, kind of

waiving me down.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And then like, There - there - there. I'm like, What are you talking

about? Theyre, They ran through here and ran through the door.

DET. ENGLEFIELD: Okay.

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OFFICER CUNNINGHAM: And then, Where are they, they said, Make a right and make a left.

All right. Well - and - and did they say, The cops ran through here but... **DET. ENGLEFIELD:**

OFFICER CUNNINGHAM: I just said, Where are they?

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And they just answered ...

And they responded. **DET. ENGLEFIELD:**

OFFICER CUNNINGHAM: ...they just answered . Obviously the was there.

DET. ENGLEFIELD: Okay. Backing up a little bit.

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: Between MLK and Broadway...

OFFICER CUNNINGHAM: Mm-hm.

Villegas?

DET. ENGLEFIELD:

OFFICER CUNNINGHAM: I heard garbled something.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM:

going out.

I don't know what it was because the radio transmission wasn't really

...and here did you hear any other traffic on the radio from either Deon or

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: It was...

DET. ENGLEFIELD: Do you - do you know what was wrong?

OFFICER CUNNINGHAM: ...just static. No. You couldn't even tell. It was just staticky.

DET. ENGLEFIELD: Okay.

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OFFICER CUNNINGHAM: And there was just nothing.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: And so was there any - any updates from - if you didn't heard them were there

- was there any updates from anybody else?

OFFICER CUNNINGHAM: Mm-mm. I was...

DET. ENGLEFIELD: Was...

OFFICER CUNNINGHAM: ...the first one there.

DET. ENGLEFIELD: Okay. Were you - were you aware of anybody else responding via MDT or...

OFFICER CUNNINGHAM: I wasn't paying attention.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I figured other people were coming.

DET. ENGLEFIELD: Okay. Okay. So back to here you - you're...

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: ...going past the parking lot. You go - you cross L Street.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: You see what you - what you think to be two security guards?

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: And they're saying - you ask them and they said.

OFFICER CUNNINGHAM: Uh-huh.

DET. ENGLEFIELD: And so you can - then what?

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OFFICER CUNNINGHAM: Then I ran to the door. I said, Where are they? They said, Down the hall, make a right, make a left. So I ran down the hall and made a right and made a left.

DET. ENGLEFIELD: Okay. And that's - that's before you even entered the building. W- some...

OFFICER CUNNINGHAM: As - yeah. As I'm going in.

DET. ENGLEFIELD: Okay.

Yeah. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: And they said what? They said...

OFFICER CUNNINGHAM: Make a right, make a left.

DET. ENGLEFIELD: Okay.

Yeah. **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: So you ran to the doors.

OFFICER CUNNINGHAM: Ran through, went through the hall, made a right, went through the hall, made a left. And then I could see white socks and Villegas on top of the guy. Because the - the building it's a medical building, obviously. And it's just the hallway is - and they have little alcoves where, like, there'll be, like, a door. That's not very good. Here's a door. And they were, like, in a little alcove...

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: ...so to speak, if that makes sense. So, like...

DET. ENGLEFIELD: So you...

OFFICER CUNNINGHAM: ...little feet hanging out.

DET. ENGLEFIELD: Okay. So you - you round that corner.

OFFICER CUNNINGHAM: Mm-hm.

And how many officers do you see when you round that corner? **DET. ENGLEFIELD:**

OFFICER CUNNINGHAM: One. I see, like - it's just feet -- Villegas feet.

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DET. ENGLEFIELD: You see Villegas's feet. Okay.

OFFICER CUNNINGHAM: Well, I mean, Height was there right next to him. Yeah.

DET. ENGLEFIELD: Okay. So let's stay in . You - you get a little bit closer to - and I?m trying to get

what you see when you first sort of see the scene.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: Right.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: How many officers do you see there?

OFFICER CUNNINGHAM: Two. I first see Ish, Ish and the guy's feet. Um...

DET. ENGLEFIELD: Ishmael being the officer, right?

OFFICER CUNNINGHAM: Sorry. Yeah. Officer Villegas.

DET. ENGLEFIELD: Okay. You see Officer Villegas.

OFFICER CUNNINGHAM: And then when I get closer I see hi- Officer Height.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Mm-hm. And then when I got to them -- like, right with them -- I saw

that Officer Deon is right in front of - right next to, like, the door at the end of the alcove.

DET. ENGLEFIELD: So when...

OFFICER CUNNINGHAM: So this is the door.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: So sort of it looks something like this.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And this is the one door right here.

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DET. ENGLEFIELD: Okay. And this hallway can - there's a hallway and...

OFFICER CUNNINGHAM: Yeah. And it goes down.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I'm - I'm sure there's, like, a door or something.

DET. ENGLEFIELD: So there's a - a - a policeman from where everybody is at.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: Can you perhaps draw an X and put - put a V for Villegas...

OFFICER CUNNINGHAM: Okay.

DET. ENGLEFIELD: ...an X and then put a - a D for Deon Okay. And where - so - so - so you see

these - these three officers there.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: Describe to me the individual they are dealing with.

OFFICER CUNNINGHAM: He's rolling on the ground kind of making some noises like grunting and growling. And he's fighting. His feet were f- flailing. You know, Ish was on top of him. His feet are moving

around. And then...

DET. ENGLEFIELD: Can you - can you describe just what he's wearing, please?

OFFICER CUNNINGHAM: All I saw were his white socks.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I know he had pants on but I don't remember what color.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: His shoes were off. He just had his white socks on.

DET. ENGLEFIELD: Okay. What had you heard prior to arriving on scene about what they were

dealing with or what - what did MDT say bef...

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OFFICER CUNNINGHAM: I don't know.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: We were 907. My trainee was writing.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And - and then I just heard the radio traffic. So when dispatch said they

needed units and they sh- they broadcasted the address, I didn't read the call.

DET. ENGLEFIELD: What did you think you were walking into?

OFFICER CUNNINGHAM: A fight.

DET. ENGLEFIELD: Okay. Okay. So you - so - so you thought you were walking - you thought you

were walking into a fight in which - some of the officers were in a fight.

OFFICER CUNNINGHAM: Yeah. I was afraid that they were being hurt because...

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: ...I mean, they don't ki- Deon and Villegas don't call for cover. So if

they called for cover, like, I mean, I know it's not good.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: It's bad if they're in a really good fight. And that's exactly what happened when I showed up. The guy was pinned down on the ground but he was still actively fighting and

yelling and grunting and not re-resisting -- not complying at all.

DET. ENGLEFIELD: And who was in the call for cover that initially that got your attention?

OFFICER CUNNINGHAM: I heard Ish on the radio. I don't know what he said.

DET. ENGLEFIELD: Officer Villegas?

OFFICER CUNNINGHAM: Yeah, sorry.

DET. ENGLEFIELD: Okay. Uh...

OFFICER CUNNINGHAM: Officer Villegas on the - on the radio -- I don't know what he said.

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DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM:

It was something. And then I heard Officer Deon probably, like, 30

seconds later saying, Cover.

Okay. **DET. ENGLEFIELD:**

So he said something and then I... OFFICER CUNNINGHAM:

DET. ENGLEFIELD:

So you knew Officer Villegas is there - was there. And you knew that Officer

Deon was there.

Yes. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: And based on the radio chatter and the call you presumed that some - they

were in some - a fight with somebody.

OFFICER CUNNINGHAM: Yes.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I presumed a bad fight.

DET. ENGLEFIELD: Okay. All right. I'm going to call him the suspect for now but you only saw his

- his feet?

OFFICER CUNNINGHAM: At that - yeah.

DET. ENGLEFIELD: Okay. Can you describe how he was positioned relative to these three officers

and to the scene?

OFFICER CUNNINGHAM: He was laying down this way. So his feet were, like, sticking out here.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And he was - he was facing - he was laying on his stomach.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Right there.

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DET. ENGLEFIELD:

So - and the way you depicted here w- would - would Officer Villegas be on

top of him?

OFFICER CUNNINGHAM:

Yeah. He was - it looked like he was on top of, like, his hamstrings.

DET. ENGLEFIELD:

Okay. Was he - and this - we're talking about Officer Villegas right now.

OFFICER CUNNINGHAM:

Mm-hm.

DET. ENGLEFIELD:

You see him on top of his hamstrings. Was he standing on them, was he

kneeling, sitting -- what was his position on top of the suspect's hamstrings?

OFFICER CUNNINGHAM:

He was kneeling...

DET. ENGLEFIELD:

Okay.

OFFICER CUNNINGHAM:

...with his shins on, like, top of his hamstrings, like, trying to pin him

down. That's what it looked like to me. But then his...

DET. ENGLEFIELD:

So his - so hamstrings...

OFFICER CUNNINGHAM:

Yeah.

DET. ENGLEFIELD:

...back of the legs?

OFFICER CUNNINGHAM:

Mm-hm.

DET. ENGLEFIELD:

The upper part of the legs?

OFFICER CUNNINGHAM:

Yes.

DET. ENGLEFIELD:

Okay. And you say Officer Villegas was kneeling on that portion of the

suspect's hamstrings.

OFFICER CUNNINGHAM:

Mm-hm.

DET. ENGLEFIELD:

Do you r- do you remember whether or not it was his left knee kneeling, right

knee, both?

OFFICER CUNNINGHAM:

No. I think it was like his shins were, like - like he was trying to pin

him down.

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DET. ENGLEFIELD: Okay. Both his shins, one of his shins?

OFFICER CUNNINGHAM: From what I could tell.

DET. ENGLEFIELD: Both?

OFFICER CUNNINGHAM: I think so, yeah.

DET. ENGLEFIELD: Okay. Do you remember which way Officer Villegas was - was facing? Was

he facing...

OFFICER CUNNINGHAM: He was facing the doorway. So he was facing this way.

DET. ENGLEFIELD: So the same direction as the off- as the suspect's head.

OFFICER CUNNINGHAM: Uh-huh. But the guy kept lifting up and Villegas was, like, moving. I

remember he was moving back and forth.

DET. ENGLEFIELD: Do you remember seeing - what was Villegas doing with his hands?

OFFICER CUNNINGHAM: I - I don't know. I couldn't see his hands.

DET. ENGLEFIELD: Okay.

DET. ENGLEFIELD: So based on your - your depiction there, behind the suspect...

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: ...further away from you past Officer Villegas, Officer Deon would've been to

the left?

OFFICER CUNNINGHAM: No, to the right.

DET. ENGLEFIELD: Of you?

OFFICER CUNNINGHAM: Oh, of me? No.

DET. ENGLEFIELD: Yeah.

OFFICER CUNNINGHAM: To my right. Because if I'm right here he was - this - I'm sorry. Who -

who?

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DET. ENGLEFIELD: Okay. So when you - when you finally got there...

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: ...okay, so you're - put an X where you are when you sort of finally...

Right there. OFFICER CUNNINGHAM:

Okay. Can you describe where Officer Deon was relative to Villegas and the DET. ENGLEFIELD:

suspect?

OFFICER CUNNINGHAM: He was in front of Villegas just barely to his right and at maybe, like,

the - the suspect's, like, head and shoulder area.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: The right side of his body...

DET. ENGLEFIELD: When you...

OFFICER CUNNINGHAM: ... of - of the torso.

DET. ENGLEFIELD: When you first got there what was Officer Deon doing?

OFFICER CUNNINGHAM: He was kind of leaning on top of him trying to pin him down.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: But he was - they - they - you could tell he was having a hard time

keeping him down.

DET. ENGLEFIELD: You say kneel - kneeled on top of him.

OFFICER CUNNINGHAM: Well he was leaning over the top of him. I couldn't see where his - I

know his hands and his arms were, like, holding him down.

DET. ENGLEFIELD: Holding the suspect down?

OFFICER CUNNINGHAM: Yeah. But, I mean, I really wasn't paying much attention to, like, where

all of his body was. I mean...

DET. ENGLEFIELD: Okay.

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OFFICER CUNNINGHAM: ...he was trying to pin him down.

DET. ENGLEFIELD: Was he - is he - was he - was he kneeling -- was Officer Deon using his knees?

OFFICER CUNNINGHAM: I don't know.

DET. ENGLEFIELD: All right.

OFFICER CUNNINGHAM: I just know his hands were. Because he was kind of sitting up and

leaning down on him from what I could see.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: So I don't know what he was doing legs.

DET. ENGLEFIELD: On the suspect's shoulders?

OFFICER CUNNINGHAM: Yeah, his upper body.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I don't know exactly what part, though.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I can't really see because the tight is - and it - the spa- space is a lot tighter than this. So, I mean, if I went over here I'd have to, like, walk on top of Height. Like, it wasn't - it's not a

very big space.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I mean, they're kind of bigger dudes but I mean, I couldn't even get in

there. Like, I - I got there like, 'What do you guys want me to do'?

DET. ENGLEFIELD: Okay.

And I was like pin - when this guy pinned his feet down he, like, OFFICER CUNNINGHAM:

crosses across them.

DET. ENGLEFIELD: Okay. But we'll get to...

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OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: ...what you did. Let's - let's - I've still got to place everybody before...

OFFICER CUNNINGHAM: Right.

DET. ENGLEFIELD: ...you turn - took action. Officer Height, where was he?

He was right next to, like, the guy's legs, to the right. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Okay. And what was he doing?

OFFICER CUNNINGHAM: I don't know.

DET. ENGLEFIELD: Okay.

I don't know. I don't know. **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I'm not sure about that.

DET. ENGLEFIELD: All right. So you get there ready to take a quick second to assess.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: And then you just - you - you just said that you asked one of the officers,

'What do you want..." - what they wanted you to do?

OFFICER CUNNINGHAM: Yeah. Because I jumped down and I started to hold his feet down to

hold him.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And then I'm like, 'What do you guys want me to do'? Because there -

there wasn't enough space.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And he's like, 'Just cross them. So I crossed them over and end up, actually, I think pinning one of Ish's legs between the suspect's legs. It was kind of an awkward space. So the guy

was laying with both of his feet out.

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DEI. ENGLEFIELD:	Окау.

OFFICER CUNNINGHAM: And I crossed them over but, I don't know - one of them under Officer

Villegas? leg and on top. And I was holding down with all my weight to keep him from moving.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And I was grabbing on his hands. And even I had a hard time holding

down...

DET. ENGLEFIELD: Grabbing his hands?

OFFICER CUNNINGHAM: I'm sorry. I was grabbing my hands - grabbing onto his feet...

DET. ENGLEFIELD: Okay.

...with my hands. And I was having a hard time holding him down. I **OFFICER CUNNINGHAM:**

was putting all my body weight - my upper body weight on top of his legs with my hands or...

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: ...feet.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And I ended up pinning one of Villegas's legs, I think, between his feet.

DET. ENGLEFIELD: Okay.

So... **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: How - how long do you think you had Villegas pinned?

OFFICER CUNNINGHAM: Oh, not - not too long. I mean...

Okay. DET. ENGLEFIELD:

OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Did he get it undid or did you give him some help?

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OFFICER CUNNINGHAM: Well we had to undo it because Harrison ran up, I don't know, maybe...

DET. ENGLEFIELD: I'm getting ahead of myself.

OFFICER CUNNINGHAM: Okay.

DET. ENGLEFIELD: I still have to go over that. So once you get there and you do this, describe to

me the demeanor or the suspect. Is he saying anything, is he...

OFFICER CUNNINGHAM: I don't remember him saying anything specifically. But I know he was,

like, grunting and, like, yelling.

DET. ENGLEFIELD: Do you remember what he was yelling?

OFFICER CUNNINGHAM: No. Just, like, that, 'Roar' and just, like, growling.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And just kind of going nuts.

DET. ENGLEFIELD: Was Officer Villegas saying anything at that point either to you or to the other

officers or the suspect?

OFFICER CUNNINGHAM: No, I don't think so. Well not that I remember him. I mean, I wasn't...

DET. ENGLEFIELD: Okay. Was officer - at - at that point was Officer Deon saying anything to the

other officers or the suspect or you?

OFFICER CUNNINGHAM: I don't know. I wasn't listening.

DET. ENGLEFIELD: Okay. What about Officer Height?

OFFICER CUNNINGHAM: Height told me, Let's cross his ankles.?

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Cross his feet.

DET. ENGLEFIELD: Did he say anything to you - the suspect or the other officers?

OFFICER CUNNINGHAM: I don't know.

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DET. ENGLEFIELD:

Okay. But when you got there Height is the one that said to cross his feet and

that's what you did?

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: Okay. So you - you just went across - in other words, like a - what is the

demeanor of Officer Villegas' What does he look like to you?

OFFICER CUNNINGHAM: He's tired and worn out. His uniform was coming all untucked and he's

- he was just in a fight. He looked, like, tired.

DET. ENGLEFIELD: Okay. What, uh - just tired.

OFFICER CUNNINGHAM: No. He just - you know, he was just - he was running out of gas. I

mean, they all were. They were fighting for several minutes.

DET. ENGLEFIELD: Okay. So - so it looked to you like Officer Villegas has - has run out of gas?

OFFICER CUNNINGHAM: Yeah. He was fatigued. I mean...

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And so was Deon.

DET. ENGLEFIELD: Have you - how long have you worked around Officer Villegas?

OFFICER CUNNINGHAM: Over a year.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Uh-huh.

DET. ENGLEFIELD: Describe to me Officer Deon's demeanor.

OFFICER CUNNINGHAM: He was red in his face and he was tired, too. I mean, they were all red

face and worn out.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And, like, you know, just tired and then, you know, looked like they

were losing steam to keep in the fight.

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DET. ENGLEFIELD: How long have you worked with Officer Deon?

OFFICER CUNNINGHAM: Same amount of time.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM:

I came back from leave November of 2015. I've been on

the same team since then.

DET. ENGLEFIELD: Officer Height, what was his demeanor?

OFFICER CUNNINGHAM: He looked tired. He was all red, too, and just they were all breathing -

all three of them were all breathing heavily and worn out, tired, fatigued.

DET. ENGLEFIELD: Okay. And how long have you worked with Officer Height?

OFFICER CUNNINGHAM: Since the beginning of this year. I mean, I've worked around with him

years ago. On the same teame since the beginning of this year.

DET. ENGLEFIELD: Okay. So Officer Height says, Cross his - cross his feet. You do that.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: And then realize that - that Officer Villegas' foot or part of his leg might be

trapped. So you undo that.

OFFICER CUNNINGHAM: No. I did realize it was like that but it was keeping the guy pinned

down so I...

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: ...just left it.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And the Harrison came up. I noticed he was there. I don't know when

he came up. I - whenever I noticed I asked him - told him, Give - give me your hobble so I can tie that guy's feet.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: So we went to hobble him and I had to unwind like, one of the guy's

feet around Officer Villegas' leg. And it - this is all...

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DET. ENGLEFIELD: But you're saying that you had to wrap the hobble?

OFFICER CUNNINGHAM: No. I had to unwind the guy's legs. One of his legs I had trapped underneath - between Villegas - Villegas' legs were - one leg was just trapped between the guy's legs.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: So I had to kind of, like, move one leg over and then shove Ish - or Villegas' leg over to the side in order to get the guy's legs together.

DET. ENGLEFIELD: Okay.

And then he - the guy calmed down. And when we... OFFICER CUNNINGHAM:

DET. ENGLEFIELD: So the - so - so you get the legs - you get Villegas' leg out of that situation.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: And then Harrison handed you - the - the...

OFFICER CUNNINGHAM: I don't know when he gave me the hobble. He was trying to give it to me and then I noticed that we - the - I noticed some other people had gotten there and I - I didn't realize they were there. Somebody said, 'Tap them out. Let's tap you guys out. We'll replace you guys," because they were so tired. And then...

DET. ENGLEFIELD: Replace you guys or replace...

OFFICER CUNNINGHAM: The three of them -- Height, Deon, and Ish...

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: ...Villegas.

DET. ENGLEFIELD: So you hadn't gotten the hobble on there yet.

OFFICER CUNNINGHAM: No.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And at one point it fell on the ground and I shoved it in my pocket.

But...

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DET. ENGLEFIELD: Okay. And you're - so did - did any time you, at that point or - or afterwards, you ever get the hobble deployed on the suspect?

OFFICER CUNNINGHAM: No.

DET. ENGLEFIELD: All right.

OFFICER CUNNINGHAM: Pias, Harrison, and Pias' trainee, Spring maybe, they continued to hold

that guy down.

DET. ENGLEFIELD: How long after Harrison showed up did Pias and his trainee show up?

OFFICER CUNNINGHAM: I don't know.

DET. ENGLEFIELD: Okay. So...

OFFICER CUNNINGHAM: I don?t think very long.

DET. ENGLEFIELD: Okay. So - so let's back up and keep going from you've got the hobble, you're

trying to deploy it...

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: ...but you don't -- it falls on the floor. And then what?

OFFICER CUNNINGHAM: Pias jumped over the top of me and was holding the guy down. And then Harrison and Spring were there. I looked up and I saw Ish and them, like, walk down the hallway. I went to go - I got up and went and checked on Villegas, make sure he was okay. Because he was breathing pretty hard and looked a little stressed out -- just kind of fatigued. Checked on Height and Deon to make sure that they were okay, like, physically. And - and so...

DET. ENGLEFIELD: Okay. So - so let's - let's start right from that moment of...

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: ...you tried to put the hobble on.

OFFICER CUNNINGHAM: Well I didn't even really have it in my hands to, uh...

DET. ENGLEFIELD: Okay.

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OFFICER CUNNINGHAM: He tried to hand it to me. I never...

DET. ENGLEFIELD: Harrison tried to hand it to you?

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: Okay.

Officer Harrison tried to hand it to me. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: So Harrison - Harrison shows up. He tries to hand you the hobble.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: For whatever reason that doesn't happen. Villegas is still on top of him?

Yeah. **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Somebody says, 'Let's tap you guys out.'

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Because, you know, there are more of us here so...

DET. ENGLEFIELD: Right.

OFFICER CUNNINGHAM: ...give you a break because they were real tired. And then those guys get off and then I go to - or Pias goes - jumps over the top of me, kind of, and gets on top of him to hold him. And they had him. So...

DET. ENGLEFIELD: Who's they - they had him?

OFFICER CUNNINGHAM: Pias, Harrison, and Spring.

DET. ENGLEFIELD: So this is a trade out between...

OFFICER CUNNINGHAM: Yes.

DET. ENGLEFIELD: ...Pias, Harrison, and Spring and Deon, Height, and Villegas.

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OFFICER CUNNINGHAM: Yes.

DET. ENGLEFIELD: Okay. When Pias walks - steps over you and gets...

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: ...gets wherever he is. Tell me where he does.

OFFICER CUNNINGHAM: He just pinned him down. I noticed that they had him and the guy wasn't moving as much and they seemed to have control of him. I got up and walked away and went and checked on the other guys.

DET. ENGLEFIELD: So - so Pias jumped over - somehow got over you.

OFFICER CUNNINGHAM: Yeah. He...

DET. ENGLEFIELD: Did he put his hands on the suspect's legs?

OFFICER CUNNINGHAM: I don't know.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Once he got over he kind of - kind of climbed over the top of me.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: So I kind of had to, like, get out and I wasn't going to stay and he was fine. And he was like - and then I just got out.

DET. ENGLEFIELD: You say they had him. I'm trying to...

OFFICER CUNNINGHAM: That's all right. He was - he wasn't st- like, resisting, it didn't seem like. They - they had him pinned well and he was fine. He wasn't, like, yelling anymore, I didn't remember hearing.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And he wasn't - his legs weren't moving around like they were before.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: So I felt they were fine. And I looked up and I saw Villegas and the other guys walking down the hall. I went to go check on them.

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Okay. So prior to - to Pias, Spring, Harrison, and - missing anybody? **DET. ENGLEFIELD:**

OFFICER CUNNINGHAM: No, that's it.

Prior to those three showing up and... **DET. ENGLEFIELD:**

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: ...sort of relieving the first three, did - do you see any type of use of force other

than just until they get the guy under control with their hands?

OFFICER CUNNINGHAM: I heard a taser go off.

DET. ENGLEFIELD: Okay. So when did you hear that?

OFFICER CUNNINGHAM: Sometime after I grabbed the ankle and feet -- feet-ankle area.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I don't know.

DET. ENGLEFIELD: So before Harrison shows up.

OFFICER CUNNINGHAM: Yes.

DET. ENGLEFIELD: Okay. So before Harrison shows up...

Before I see Harrison. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Before you see Harrison...

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: ...you hear it, Did you see a taser?

OFFICER CUNNINGHAM: No. Well yeah. I mean, well, after I heard it then one ended up in the small little space between Villegas, Height, and I. It's a very tight area so there really isn't much room. This

actually gives it too much room if that.

Okay. Yeah. So - so at some point after you - you - you've undone his legs and **DET. ENGLEFIELD:**

- is that when it happens or does it happen before?

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OFFICER CUNNINGHAM: Before that.

DET. ENGLEFIELD: So Villegas' leg is still trapped in there somehow.

Yeah. **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: You've still got that sort of clamped down?

OFFICER CUNNINGHAM: Mm-hm.

And at that point you hear a taser? DET. ENGLEFIELD:

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: Regarding the...

OFFICER CUNNINGHAM: Sometime.

DET. ENGLEFIELD: ...the X16 Taser model, CED.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: And is it - and my understanding the taser's deployed two different ways.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: Is it the - the point that where darts come out or is it just the arching?

OFFICER CUNNINGHAM: The arching.

DET. ENGLEFIELD: Just the arching noise.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: So his leg still is - is trapped. You hear that noise. Do you see some of it --

like, the taser -- or do you just hear it?

OFFICER CUNNINGHAM: No, I just heard them.

DET. ENGLEFIELD: Okay.

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OFFICER CUNNINGHAM: It was almost like we were all on top of each other, or the three of them were . So I really didn't even see much of the guy at all or what was going on in front of me.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: But I could hear it.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And then a taser ended up at...

DET. ENGLEFIELD: Before you do that...

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: ...how do you - do you hear w- the taser go off once?

OFFICER CUNNINGHAM: Once.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I heard it once, yeah.

DET. ENGLEFIELD: And do you - do you remember how long -- was it - was it in your estimation

the full five seconds that a taser normally deploys, less than that, more than that?

OFFICER CUNNINGHAM: No more than that.

DET. ENGLEFIELD: No more than five seconds?

OFFICER CUNNINGHAM: It wasn't more, yeah.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Yeah., yeah.

DET. ENGLEFIELD: At that point other - you describe hearing the suspect growling at you, was

your term.

OFFICER CUNNINGHAM: Yeah.

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DET. ENGLEFIELD:

Were the officers saying anything around that time of the - of the deployment

of that taser?

OFFICER CUNNINGHAM: I don't think so.

DET. ENGLEFIELD:

All right.

OFFICER CUNNINGHAM:

I don't remember, no.

DET. ENGLEFIELD:

After you hear then taser then you said something about seeing a taser

somewhere?

OFFICER CUNNINGHAM: Yeah. So Ish - or Villegas was right here and ended up, like, at, like,

where my hands were on the ground between Height, Villegas, and I.

DET. ENGLEFIELD:

Okay. So was he to the - to the right of the guy - the suspect's legs?

OFFICER CUNNINGHAM:

Yes.

DET. ENGLEFIELD:

Okay.

OFFICER CUNNINGHAM:

And then I picked it and I moved it out of they way.

DET. ENGLEFIELD:

You picked it up?

OFFICER CUNNINGHAM:

Yeah, because I just moved it out of the way.

DET. ENGLEFIELD:

Did you move it to your right -- which would've also been the suspect's right --

or your left?

OFFICER CUNNINGHAM:

My right.

DET. ENGLEFIELD:

Or behind you?

OFFICER CUNNINGHAM:

My right and a little bit behind me.

DET. ENGLEFIELD:

Okay. So you pick up the taser and you move it to the right somewhere.

OFFICER CUNNINGHAM:

Mm-hm.

DET. ENGLEFIELD:

Okay. Does anybody say anything about that taser about, 'Hey, that's mine," or

is there any comment about that taser...

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OFFICER CUNNINGHAM: Mm-mm.

DET. ENGLEFIELD: ...at that time Okay. So you hear the taser go off. Then you see a taser

somehow end up on the ground.

Mm-hm. **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: And then you picked it up and moved it?

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: And then what?

OFFICER CUNNINGHAM: We're still pinning him down. I think it was before Harrison got there. And then - I think it had to have been. One of the security guards came over and started picking up, like, the stuff - like, our equipment -- whatever was down there -- and picked up that taser and stuff. I yell at him to stop and to go down there and waive the other officers in at the door off of Alhambra.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Just to get him out of the way.

DET. ENGLEFIELD: Do you remember which security guard this would've been?

OFFICER CUNNINGHAM: The older guy.

DET. ENGLEFIELD: So the older guy comes in and you think...

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: ...now does he move that' Does he actually pick it up and move it?

OFFICER CUNNINGHAM: Yeah. He was, like pushing things out of the way and just trying to help

us.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: But he was just kind of getting in the way. And he just kind of pushed

them off to the side.

Pushed the taser off to the side? **DET. ENGLEFIELD:**

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OFFICER CUNNINGHAM: Yeah. Because he took...

DET. ENGLEFIELD: Was there any other equipment besides that taser?

I don't think so. **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: Okay.

I don't remember. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: But I told him, uh - I just said, Hey, just pick the - leave that stuff there. Go down there and just waive the other officers in. Because they were kind of, like, . The security guard know where they were.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: But I just wanted him to get out of there, you know?

DET. ENGLEFIELD: So that happens...

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: ...because they got - move it. You say, 'Just go down there and open the door.'

Then what happens?

OFFICER CUNNINGHAM: And that's when Harrison came up.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Because, yeah, that guy moved out of the way and that would have

allowed Harrison to come right there.

DET. ENGLEFIELD: Okay. So Harrison shows up.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: Then what happens?

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OFFICER CUNNINGHAM:

Then I told him to get the hobble out. And we tried to hold that guy's

legs...

DET. ENGLEFIELD:

Okay.

OFFICER CUNNINGHAM:

...around Villegas'. And then I think I put them next to each other down

to do it.

DET. ENGLEFIELD:

The legs?

OFFICER CUNNINGHAM:

Yeah.

DET. ENGLEFIELD:

Okay.

OFFICER CUNNINGHAM:

Or the ankles or the ankle-feet area.

DET. ENGLEFIELD:

And you - at this point you had the , like, out.

OFFICER CUNNINGHAM:

Yes.

DET. ENGLEFIELD:

Okay.

OFFICER CUNNINGHAM:

And then somebody says, 'Tap - you guys, let's tap out. We have ,or

something like that. And then those guys jump off and other people jump on him.

DET. ENGLEFIELD:

So then Villegas, Height, and Deon get off of this guy.

OFFICER CUNNINGHAM:

Yes.

DET. ENGLEFIELD:

And then Spring, Pias, and Harrison.

OFFICER CUNNINGHAM:

Yes.

DET. ENGLEFIELD:

You already described Pias a little bit. And you said Pias walked over you -

climbed over you somehow and took whose - whose place?

OFFICER CUNNINGHAM:

Ish - or Villegas?.

DET. ENGLEFIELD:

Villegas' place.

OFFICER CUNNINGHAM:

Mm-hm.

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DET. ENGLEFIELD: Did he get on the suspects hamstrings - or, I'm sorry, the legs like - like,

Villegas had been or did he do something different?

OFFICER CUNNINGHAM:

I don't know. I mean he was - got on top of, like, that portion of the

body. I don't know exactly...

DET. ENGLEFIELD: The lower portion?

Yeah. The... OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: ...the lower portion. I don't know exactly what. Because once he started

to climb over me he kind of trapped me underneath him. So I kind of had to, like, squirrel out.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And I looked up and I just saw these guys walk away. And I went to go

check on them.

DET. ENGLEFIELD: So you saw Pias had the lower half of the body.

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: Where did you see Harrison?

OFFICER CUNNINGHAM: He would've been more like Height was.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And then Spring was, like, where Deon was.

DET. ENGLEFIELD: Do you see either Spring or Harrison with their hands on the su-suspect?

OFFICER CUNNINGHAM: I think Spring had his hands on his upper body. I mean, he was up there

and he was, like, pushing down.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: But we're, like, detaining him to try...

Okay. **DET. ENGLEFIELD:**

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OFFICER CUNNINGHAM: ...to keep the guy still. But once I could crawl out I didn't even pay

attention to him anymore.

Yeah. Come on back.

DET. ENGLEFIELD:

Did you see where Harrison was doing with his hands at all?

OFFICER CUNNINGHAM:

No.

Man:

Man:

Okay.

DET. ENGLEFIELD: At this point when - after the sort of changeover takes place, what's the demeanor of the suspect at that point?

OFFICER CUNNINGHAM: He was still making some noises but his - I noticed that his feet - well his legs and feet weren't moving around as much. So it looked like they had him, like, detained and controlled. And - and he seemed, I think - he was still making noises and he seemed fine. He just seemed like he calmed down.

DET. ENGLEFIELD: Were there handcuffs on him at this point or...

OFFICER CUNNINGHAM: Yeah, there were handcuffs on him.

DET. ENGLEFIELD: Do you remember who put the handcuffs on him?

OFFICER CUNNINGHAM: No.

DET. ENGLEFIELD: Okay.

That's when I first noticed he was handcuffed. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: So they get on him. And at some point is - he gets handcuffed -- you're not

sure by who.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: And then you get up to go check on, uh...

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OFFICER CUNNINGHAM: Villegas.

DET. ENGLEFIELD: ...Villegas. Okay. When you walked away from the suspect what position was

the suspect in -- still in - still being detained by Pias, Spring, and Harrison?

OFFICER CUNNINGHAM: Yes.

DET. ENGLEFIELD: Okay. Um on his stomach?

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: Okay. So you walk away, suspect is still on his stomach?

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: Then what happened?

OFFICER CUNNINGHAM: I went and checked on Ish. I really wasn't paying attention to the guy. I walked back down the hall. And we were all kind of relaxed the guy stopped moving around - like, stopped the fighting or anything. And then fire showed up a few minutes later - a minute later or two. And everybody had been - was off of him at that point. And I was half paying attention because I was talking to other people.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And I'd just kind of glanced over and look.

DET. ENGLEFIELD: When you glanced over was he - was the suspect moved at all from his face-

down position?

OFFICER CUNNINGHAM: I think he was on his side. And eventually he was sat up.

DET. ENGLEFIELD: So at some point you think he might've been on his side?

OFFICER CUNNINGHAM: I think so, yeah, because he - yeah.

DET. ENGLEFIELD: Okay. And then you - then - then at some point after that you think he was - he

- he sat up.

OFFICER CUNNINGHAM: Yeah. He was on his side because when fire got there they asked if he they - they could sit him up. So they sat him up.

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DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And then, I don't - they wanted his handcuffs in the front.

DET. ENGLEFIELD: Who fire?

Fire wanted his handcuffs in the front. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: So you - he was originally handcuffed in the back?

OFFICER CUNNINGHAM: Yes.

DET. ENGLEFIELD: And then fire requested them to be moved to the front?

OFFICER CUNNINGHAM: Yes.

Who did - who took care of that? **DET. ENGLEFIELD:**

OFFICER CUNNINGHAM: I don't know.

DET. ENGLEFIELD: Okay.

I think Pias did. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: But somebody did it?

OFFICER CUNNINGHAM: Yeah. I think yeah.

DET. ENGLEFIELD: Because positioned in the back and then at some point they moved to the front.

OFFICER CUNNINGHAM:

anymore.

Yeah. Because he was calm then. He wasn't resisting or fighting

DET. ENGLEFIELD: What - what was his demeanor at that point?

Calm. Just kind of - he was just sitting there. OFFICER CUNNINGHAM:

Did you see his face? **DET. ENGLEFIELD:**

OFFICER CUNNINGHAM: No. I was behind him.

DET. ENGLEFIELD: Okay. Was he saying anything?

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I don't think so. I wasn't - I don't know. **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: Okay. So - so fire gets there and then what happens?

OFFICER CUNNINGHAM: They ask what happened. They told him what happened. Um...

DET. ENGLEFIELD: Who told them?

OFFICER CUNNINGHAM: I don't know -- somebody.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I don't know. All right. And then they asked to sit him up and they just handcuff his - his handcuffs to go move to the front. They move - somebody moved them to the front. And then they s- they laid him down and I looked over at him. I saw then that he looked a little more out of it. But he didn't look too good and then they started giving him CPR.

DET. ENGLEFIELD: Were his eyes opened or closed at that point?

OFFICER CUNNINGHAM: Half open.

DET. ENGLEFIELD: Okay.

Yeah. I saw the whites of his eyes a little bit. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Yeah. And they worked on him for a little while.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And then I heard them say.

DET. ENGLEFIELD: Okay. Okay. So between the time that you walk away to go check on Villegas it would have been Pias, Spring, or - or Harrison that dealt him, had the handcuffs - had his handcuffs and before fire got there?

OFFICER CUNNINGHAM: Yes.

DET. ENGLEFIELD: And you didn't go back over there during that time?

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OFFICER CUNNINGHAM: Mm-mm.

DET. ENGLEFIELD: So then the next time you run back over there was when fire would have been?

OFFICER CUNNINGHAM: I didn't walk past him. I didn't go back over to him. I walked back the

other way because, I mean, Height was over there on the other side -- just check on him.

DET. ENGLEFIELD: When you say you - you went to go check on Villegas, was that west toward

Alhambra or back the way you came in from the front door?

OFFICER CUNNINGHAM: West toward Alhambra.

DET. ENGLEFIELD: Okay. And which way did Deon and - and Height go? Did they all seem to go

west toward Alhambra or they - were they more to the east and the north?

OFFICER CUNNINGHAM: When I came - after I checked on Villegas and I came back they were

more east. So I don't know where they were immediately...

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: ...but they were, like, right here.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: More east just a little bit, like.

Okay. Um - so I'm going to out and see if anybody else has any - anymore **DET. ENGLEFIELD:**

questions.

OFFICER CUNNINGHAM: Mm-hm.

DET. ENGLEFIELD: Give you a break.

(The interview was paused for approx. 11 minutes and then resumed.)

DET. ENGLEFIELD: When you first arrived on scene...

Mm-hm. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: ...what do you think about this - this suspect? What was your thoughts in

regards to this suspect?

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OFFICER CUNNINGHAM: That he was fighting them and hurting the officers.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: Um...

When I first saw him? OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Yeah.

OFFICER CUNNINGHAM: Yeah, that he was hurting them.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: fight.

DET. ENGLEFIELD: Anything particular just to his demeanor?

OFFICER CUNNINGHAM: That he was resisting. I could tell when I first came up there that he was resisting because his ankles, feet, legs - the part I could see were moving all around. And they were s- like, trying to hold him down but he - they - obviously I could tell they were having a hard time.

DET. ENGLEFIELD: Mm-hm.

OFFICER CUNNINGHAM: Like, I could tell they were fatigued and flushed and, you know, that they had been in this fight for a little while and that they were starting to struggle to hold him down and detain him.

Is there anything that - that gave you any indication as to his mindset when this **DET. ENGLEFIELD:**

was going on?

OFFICER CUNNINGHAM: I thought he was - I mean, I thought he - he was on drugs because he's the fighting that much with three officers on top of him that he was not willing to go to - quietly. He was...

DET. ENGLEFIELD: Have you - how - how many years you (have on)?

Ten. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Have you encountered - so - so you're thinking that this guy was drugs?

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OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: Had you encountered people on drugs before?

OFFICER CUNNINGHAM: Every day that I work.

DET. ENGLEFIELD: Is this occasionally how they respond?

Yes. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Um...

OFFICER CUNNINGHAM: There were no pain tolerance, they're hard to detain. Just the - the drugs in their system, especially when they put so much, they - they - you know, you put a wristlock on them or you detain them and they still fight you because they don't feel any pain. They just keep fighting.

DET. ENGLEFIELD: And that's what you were thinking when - when you arrived on scene?

OFFICER CUNNINGHAM: Yes.

DET. ENGLEFIELD: You said at some point you got up and - and Villegas went toward the west

toward Alhambra?

OFFICER CUNNINGHAM: Yeah.

DET. ENGLEFIELD: And - and you said - was - was Deon and Height also in that area?

OFFICER CUNNINGHAM: No. I don't know which way they initially walked.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I just know I got up, I saw Villegas, and I just wanted to check on him because he was breathing really heavy. He was...

DET. ENGLEFIELD: W- yeah. What's his demeanor when you got over there -- what was his status?

OFFICER CUNNINGHAM: He was breathing really heavy. He couldn't really even say, 'I'm okay.' He was - he could barely really say anything. His shirt was all untucked. He was red in the face. He was - he was sweating, he was shaking, his hands were shaking. He was tired. I mean, he was - had a fight with this guy and he just was trying to catch his breath.

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DET. ENGLEFIELD:

Then you - at - at - at that point or at that time did you check on either Deon or

- or Height?

OFFICER CUNNINGHAM:

Yeah. After I talked to him for, I don't know, a minute or so, I went

over and checked on them, too.

DET. ENGLEFIELD:

What was their - was their status? What was...

OFFICER CUNNINGHAM:

They...

DET. ENGLEFIELD:

...what was Deon's status?

OFFICER CUNNINGHAM: He was still breathing real heavy -- still trying to catch his breath. He was red in the face. His hands - he open his hands and his hands were still a little shaky and they were all red. And he had some, like, little scratches that were bleeding at that time on his hands.

DET. ENGLEFIELD:

And what about Height?

OFFICER CUNNINGHAM:

Height was red. His or- he was sweaty and the same thing -- he was

still trying to catch his breath. Just kind of, like, pacing a little bit trying to get his composure back.

DET. ENGLEFIELD:

Okay. Did you see anybody use any type of force after the handcuffs were

applied?

OFFICER CUNNINGHAM:

No.

DET. ENGLEFIELD:

Okay.

OFFICER CUNNINGHAM:

I don't know when the handcuffs were applied. I mean...

DET. ENGLEFIELD: first saw...

At whatever point you saw the handcuffs applied, whenever that was when you

OFFICER CUNNINGHAM:

When I saw him in handcuffs?

DET. ENGLEFIELD:

Right after you saw him in handcuffs - that's a better way. After you saw him

in - in handcuffs was there any force applied to him after that?

OFFICER CUNNINGHAM:

No.

DET. ENGLEFIELD:

Okay. You remember what - w- why was fire called?

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OFFICER CUNNINGHAM: Because he was tased.

DET. ENGLEFIELD: Okay. Is that something that somebody said or did you call fire or...

I didn't call fire. OFFICER CUNNINGHAM:

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I don't know who did.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: But I heard a taser so - anytime - usually somebody will call fire out to

check up on him.

DET. ENGLEFIELD: Okay. Was there anything other than that in the suspect's demeanor that

precluded calling fire?

OFFICER CUNNINGHAM: No.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Not a word, no.

DET. ENGLEFIELD: Okay.

JEFF EDWARDS: When you - when you say that precluded calling fire or do you mean

that would cause someone to call fire?

DET. ENGLEFIELD: That's what I mean -- the - the second one.

OFFICER CUNNINGHAM: Oh.

DET. ENGLEFIELD: Yeah.

OFFICER CUNNINGHAM: No. I just presumed somebody called fire because...

DET. ENGLEFIELD: Mm-hm.

OFFICER CUNNINGHAM: ...he had been tased. I wasn't paying much attention to him. Right after

when Ish and Deon and (Casey) got up I didn't really pay much attention to him and what that guy was doing.

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DET. ENGLEFIELD: Okay. And so you described him as laying on his side at one point when you you described it as you walked away and he's in handcuffs. And then at some point he was on his side?

OFFICER CUNNINGHAM: Yeah.

Do you remember w- left - his left, his right? **DET. ENGLEFIELD:**

OFFICER CUNNINGHAM: I think it was his left because his back was, like, more towards the wall.

DET. ENGLEFIELD: Oh and when you - when you walk away or when you saw him on his left side,

what did you think about his situation at that point?

OFFICER CUNNINGHAM: What do you mean his situation? Like...

DET. ENGLEFIELD: What's his...

...his health? **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: ...what's his demeanor at that point? Yeah. What was - was there anything of

note at that point other than...

OFFICER CUNNINGHAM: He was calm.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Like, I mean, when I first got there he was erratic and acting erratic and yelling and screaming and resisting. But once he was in that spot he was calmed down and he just looked like he was laying there, like, breathing and, like, he finally just calmed down.

DET. ENGLEFIELD: Y- you said his back was to the wall. That would - does that mean that you can

see his front or you could see his back?

OFFICER CUNNINGHAM: I could see a little bit of his side back. I was now over, I guess, sort of

an east of him.

DET. ENGLEFIELD: Okay.

And I just kind of, like, glanced over and that?s just what I remember OFFICER CUNNINGHAM:

seeing. I wasn't, like, staring at him or paying much attention to him at all.

DET. ENGLEFIELD: Mm-hm. So he would've been - you were to the east.

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GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

OFFICER CUNNINGHAM: I was over here...

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: ...somewhere. And I was talking.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And I just kind of glanced at him. I really wasn't paying atte- once I left

him I didn't pay much attention to him.

DET. ENGLEFIELD: So this is north and he would've been facing west-ish? He would have sort of

been facing west?

OFFICER CUNNINGHAM: I'd presume.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I just saw, like, his low- lower body.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: It looked like it was turned.

DET. ENGLEFIELD: And you could tell he was breathing at that point?

OFFICER CUNNINGHAM: He seemed fine.

DET. ENGLEFIELD: Uh...

OFFICER CUNNINGHAM: But I didn't - like I said, I wasn't paying much attention to him.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: He seemed perfectly fine.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I mean, and there are other officers with him and nobody was acting

like there was anything wrong. I just presumed he was fine.

DET. ENGLEFIELD: W- what - what were the officers doing when he was on his side?

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OFFICER CUNNINGHAM: They were just standing around him.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: Nobody was on top of him or anything anymore.

DET. ENGLEFIELD: Uh-huh. Was ...

OFFICER CUNNINGHAM: He was calm.

DET. ENGLEFIELD: ...met him?

OFFICER CUNNINGHAM: Yeah, I mean...

DET. ENGLEFIELD: Were they talking to him?

OFFICER CUNNINGHAM: I guess. I just know they were - they were over there with him.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: And he?

DET. ENGLEFIELD: Was - was the suspect saying anything at that point?

I don't know. I - I don't think so. **OFFICER CUNNINGHAM:**

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: But I wasn't really - like I said, I really didn't pay much attention to what they were doing. My focus was on Deon and Height.

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: I mean, I was - I would just glance over there occasionally. And then fire came and we were just kind of talking and kind of trying to listen to what fire was saying and not really - I mean, I wasn't really paying attention to him...

DET. ENGLEFIELD: Okay.

OFFICER CUNNINGHAM: ...excuse me -- at that point.

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REQUESTED

Okay. DET. ENGLEFIELD:

Um... OFFICER CUNNINGHAM:

Anything else you'd like to add? No? DET. ENGLEFIELD:

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Related Text Page(s)

Document: 04 OBSERVATIONS

Author: 3212 - BOHRER, CYNTHEA 0250 Related date/time: Mar-06-2017 (Mon.) 1730

On 3-6-17 at appx. 1435 hrs., I, Ofc. Bohrer responded to Alhambra Bl. and L St. code three regarding a request for code three cover by Ofc. Villegas (1B78) and Ofc. Dionne (1B89). I responded from the area of 18th Ave. and 71st St. code 3, and arrived at appx. 1440 hrs.

By the time I arrived on scene, the officers had the subject (identified as John Hernandez) detained in the hallway of 1201 L St.

I requested Fire respond as a C.E.D. had been used on Hernandez. SFD (Eng 4/ Med 6) arrived on scene at appx. 1445 hrs.

While on scene, I placed crime scene tape on the west side of the hospital entrance.

As Hernandez was being brought out on the gurney by SFD, W- and and W- approached me and advised me that had been the guy they had called in about at appx. 1353 hrs.

I took a statement from W- and W- . W- provided me with her mom's () phone number. I later gave number to Ofc. Stigerts and Ofc. Kuhlman (1C63), whom made contact with her.

I contacted the manager (W- and loss prevention officer (Cameras) at Rite Aid (1201 Alhambra Bl.). They advised the only exterior cameras they have capture the NW corner of their lot and the east side (along Seville Way). I confirmed that the cameras did not capture the incident. W- advised that he had seen the subject (S-Hernandez) I described to him earlier (before 1300 hrs.) today.

was able to locate S-Hernandez inside the store via surveillance footage. S-Hernandez is first seen going in the store at 11:45:19 hrs. Hernandez goes in and out of the store a few times. At 1204 hrs., S-Hernandez is seen at the front entry way. S-Hernandez can clearly be seen wearing a black jacket with the logo "Classic Car Wash" on the back (the same jacket that was located later hanging on the tree just outside the SW corner of the store), white t-shirt, blue jeans, and dark colored shoes with white lettering / stitching. S-Hernandez is seen entering / exiting the store with another male. The other male appears to be a white male with short hair and a goatee, wearing a dark colored long sleeve

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shirt, and has a backpack on. S-Hernandez is last seen in the store at 1207 hrs. (see surveillance video for further).

Sgt. Farnsworth (2SM6) was advised.

I retrieved a copy of the surveillance footage from and gave the DVD to Sgt. Farnsworth.

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Related Text Page(s)

Document: 06 DETECTIVE SUPPLEMENT Author: 166 - CHAN, RUDOLPH 4091 Subject: OBSERVATIONS: LT. R. CHAN Related date/time: Mar-07-2017 (Tue.) 1013

On 3/6/17, at approximately 1607 hours, I was notified by Homicide Sergeant B. Werner that a pending In Custody Death Investigation-Homicide Team call out was going to be initiated to the Sutter General Medical Building adjacent to 1204 Alhambra Boulevard. I responded to the scene to assist as the OOI-Forensic Investigations Lieutenant.

I arrived onscene at approximately 1640 hours to the Medical Building at 1601 Alhambra Boulevard. I contacted CSI Officer R. Lindner and his partner FI Behrens who were in the process of documenting the scene (see Lindner/Behrens supplements for details). At 1653 hours, I contacted SPD Dispatch and requested that they send FI S. Rossi to the Sutter General Hospital to take photos of Suspect Hernandez as well as to book any of his clothing that might be at the hospital. At 1702 hours, I checked in with scene recorder, Officer T. Maclean inside the medical building. At 1725 hours, I contacted SPD helicopter Air1 and requested that they take aerial photos of the scene at the west side Rite Aid parking lot (1125 Alhambra Blvd.) and email the photos to Sgt. Werner.

At 1732 hours, I attended the incident briefing conducted by Patrol Sgt. D. Farnsworth. Afterwards, I went on a walk through of the interior hallway on the first floor of the medical center to observe the physical evidence. (See CSI scene supplements for details). I departed the scene and responded to SPD Hall of Justice. At approximately 1924 hours, I started to secure CED (TASER) devices from all seven involved officers for download. Using the homicide detective shared computer, I downloaded the following CED's using the off-line version of Evidence Sync:

Ofc. Cunningham #496-X26 S/N: X00-216381 Ofc. Dionne #395-X26 S/N: X00-369068 Ofc. Harrison #980-X26P S/N: X13001NXF Ofc. Hight #345-X26 S/N: X00-567570 Ofc. Paiz #270-X26 S/N: X00-564157 Ofc. Spring #1006-X26P S/N: X13002T5W Ofc. Villegas #820-X26 S/N: X00-215980

Using the downloaded CED information I provided the adjusted timeline of CED deployment during the incident to the Homicide Investigation Team. (See attached TASER downloads and TASER timeline supplement).

FI Rossi also took photos of all seven CED's. I forwarded the download information for all seven CED/TASER's via .pdf reports to Detective Macaulay and Sgt. Werner of the Homicide Team. I delivered Ofc. Villegas' CED to FI Rossi for booking at 2015 hours. I returned all other CED's to their respective users. FI Rossi also took DNA swab samples from OFc. Villegas' CED and Expandable Straight Baton (ESB), as well as from Officers' Dionne and Hight's CED's (see Rossi supplements for details).

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(End of observations.)

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Related Text Page(s)

Document: 06 DETECTIVE SUPPLEMENT Author: 166 - CHAN, RUDOLPH 4091 Subject: TASER ACTIVATION TIMELINE Related date/time: Mar-09-2017 (Thu.) 1058

The following is a summary and analysis of the TASER/CED download information using the off-line version of Evidence Sync for this incident:

CED's determined to be activated within the incident time frame based on download information:

CED Model/Serial Number

Assigned Officer (per Versadex Records)

X26 S/N: X00-215980

Ofc. Villegas #820

Activation Number/Duration

Device Time Clock drift Adjusted Actual Time

1- (1 second) 14:40:10 4:30 fast 14:35:40

CED Model/Serial Number

1-(3 seconds)

2-(5 seconds)

3-(6 seconds)

4-(5 seconds)

5-(5 seconds)

6-(3 seconds)

Assigned Officer (per Versadex Records)

X26 S/N: X00-567570

Ofc. Hight #345 Clock drift Activation Number/Duration Device Time Adjusted Actual Time 6:17 fast 14:42:29 14:36:12 14:42:47 14:36:30 14:42:57 14:36:40 14:43:03 14:36:46 " 14:43:31 14:37:14 14:37:30 14:43:47

CED Model/Serial Number
X26 S/N: X00-369068

Assigned Officer (per Versadex Records)

1	<u>Device Time</u> <u>Clock drift</u>	<u>t Adjusted</u>	Actual Time
	14:54:51	16:37 fast	14:38:14
	14:54:57	"	14:38:20
	14:55:03	"	14:38:26
	14:55:11	"	14:38:34

Ofc. Dionne #395

2-(5 seconds) 3-(5 seconds) 4-(5 seconds)

1-(5 seconds)

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CED's determined to have not been used during the incident time frame based on download information:

CED Model/Serial Number

X26 S/N: X00-216381

2017

X26P S/N: X13001NXF X26 S/N: X00-564157 X26P S/N: X13002T5W

2017 @ 05:01:13*

0-564157 Ofc. Paiz #:

: X1300215W Ofc.

<u>Assigned Officer (per Versadex Records)</u> <u>Last Recorded Activation</u>

Ofc. Cunningham #496

January 23,

January 24, 2017

March 05, 2017

March 06,

Ofc. Harrison #980 Ofc. Paiz #270 Ofc. Spring #1006

*(adjusted actual time 05:10:19) clock drift was

09:06 slow

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Related Text Page(s)

Document: 06 DETECTIVE SUPPLEMENT Author: 3533 - ROBISON, BRAD 0414 Subject: CRIME SCENE SUMMARY Related date/time: Apr-05-2017 (Wed.) 938

NOTIFICATION:

On Monday, 3/6/17 at approximately 1615 hours, I was notified by Sgt. Werner of a pending Death in Custody located at 1201 Alhambra Blvd. We were advised that the suspect?s condition was listed as critical. A homicide team call out was initiated to respond to 1201 Alhambra Blvd. The Police Department responded to multiple calls of a subject causing a disturbance. During the contact officers requested that the Sacramento Fire Department respond to provide medical treatment. Engine 4 and medic 6 from shift A responded. The suspect was transported to Sutter General. Patrol officers secured the scene. Detectives E. Macaulay #0272 (IV176), A. Englefield #302 (IV67, T. Hunkapiller #0710 (IV143), L. Trimpey #0806 (IV106), J. Griggs #0670 (IV135), D. Putman #870 (IV127), Sgt. Kinney #3052 (IV14), Sgt. Start #3039 (IV16), Sgt. Werner #3116 (IV21), and I Det. Robison #414 (IV47) were requested and responded to the scene.

ARRIVAL:

I arrived on at approx. 1615 hours. I observed the crime scene secured by police crime scene tape and numerous uniformed officers, including members of SPD Command Staff.

BRIEFING:

At approx. 1730 hours, once the homicide team was present, Sgt. Farnsworth briefed us about the incident and the circumstances known to him at the time. During the briefing Sgt. Farnsworth advised that during a struggle with a combative subject, officers utilized a Conducted Energy Device (CED)to the take the subject into custody. At that time, the subject became unconscious and medical aid was rendered. **See Detective Macaulay for a detailed summary of the briefing **Several items of evidence were located at the scene by patrol officers and pointed out to investigators. All evidence was left in place and the investigation was turned over to the homicide team at that time. At the conclusion of the briefing Det. Hunkapiller and I were assigned to manage the scene.

SCENE DESCRIPTION:

The incident began in the parking lot of Rite Aid located at 1125 Alhambra Blvd when officers contacted the S-Hernandez. This area is largely a commercial area with Rite Aid being the anchor store. There are several other smaller store locations to the west of Rite Aid that share the same large parking lot. This area was identified due to the fact the S-Hernandez's sweater was hanging from a tree where the contact was made. After initial contact by officers S-Hernandez then ran into the Sutter Urgent Care building located at 1201 Alhambra Blvd. This building is directly to the south of the Rite Aid parking lot and consists of multiple floors that house numerous offices and medical waiting room areas.

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Inside on the first floor in the west hallway there were numerous AFIDs (Anti Felon Identification) from a CED deployment. Along the south wall of that hallway a CED probe with CED wire attached to it was lodged into the wall. There was also a CED cartridge and several pieces of a cartridge blast door in this area as well. S-Hernandez's clothing was located in this hallway along with his wallet that housed his CA ID card.

To the east of this building begins a large residential area.

WALK-THROUGH:

At approx. 1830 hours, the homicide team performed a walk-through of the crime scene. Prior to entering the area where the CED was fired I check in with the scene recorder Ofc. Stigerts #984. During the walk-through I observed the following:

- -Numerous AFIDs resting on the floor.
- -A CED probe with the wire attached to it lodged into a wall.
- -Numerous pieces of CED cartridge blast doors.
- -A second CED wire with no probe attached.
- An expended CED cartridge.
- -S-Hernandez?s clothing along with his wallet housing his CA ID.

Det. Hunkapiller and I participated in walk throughs with the following officers who were involved and their respective attorneys at approximately 1845 hours:

- -Ofc. Villegas and his attorney Zeb Davis from the law office of Mastagni Holstedt.
- -Ofc. Dionne and his attorney Kevin Weimer from the law office of Mastagni Holstedt.
- -Ofc. Hight and his attorney Jeff Edwards from the law office of Mastagni Holstedt.
- -Ofc. Diaz and his attorney Zeb Davis from the law offices of Mastagni Holstedt.

SCENE LIGHTING:

The lighting at the time of the incident was daylight. As the night went on the sunset. The rite aid parking lot was lit with street lights. Additionally, the interior building light of Sutter Urgent Care remained on during the entire investigation.

WEATHER/ TEMPERATURE FACTORS:

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The weather conditions near the time of the incident were listed on ?The Weather Channel? at: weatherunderground.com as:

DATE: 03-06-17

TIME: 1:53 PM PST (time of initial call 1353 hours)

TEMPERATURE: 53.1 degrees Fahrenheit

CONDITIONS: Overcast

SUNRISE: 6:30 AM PST

SUNSET: 6:04 PM PST

EVIDENCE OF SURVEILLANCE VIDEO:

A canvass of the area was conducted for surveillance. A camera was located on the exterior portion of Rite Aid pointing in the area of the initial contact, however it was determined that this camera was not functioning. Video surveillance of the interior of Rite Aid was obtained. Additionally, video footage from Sutter Urgent care was obtained and was later booked as evidence.

No officers who were present were wearing body cameras.

Ofc. Hight, Ofc. Diaz, Ofc. Villegas, and Ofc. Dionne all had their In Car Cameras (ICCs) activated. The videos from the incident were obtained.

SUSPECT INFORMATION:

The suspect info provided to detectives at the time of the briefing by Sgt. Farnsworth was as follows:

John Anthony Hernandez, DOB: 2/10/83, CA ID#

CONDITION/ CLOTHING DESCRIPTION:

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Clothing located on the scene in the Rite Aid Parking lot located at 1125 Alhambra Blvd included a black sweater shirt. Clothing located inside of Sutter Urgent Care located at 1201 Alhambra Blvd included a pair of black sweat pants, and a pair of black, white and gray Nike tennis shoes.

IDENTIFICATION OF THE SUSPECT:

The suspect was identified as John Hernandez by officers on scene through his CA ID card, which was present. This information was also confirmed with the suspect?s booking photo from the Sacramento County data base (Xref: ______).

CSI PERSONNEL:

The following CSI personnel assisted in the location, identification, photographing and collection of evidence located at the crime scene:

CSI Lindner #538

CSI Rebecca Behrens #6368

Additionally, CSI Staci Rossi #6379 took photos of suspect Hernandez at the hospital.

MEASUREMENTS AND DIAGRAM:

CSI Linder completed the crime scene diagram.

PHOTOGRAPHS:

CSI Linder took ambient light photos of the scene and each item of evidence.

VIDEOTAPE:

I Det. Robison #414(IV47), video recorded the crime scene including the various items of evidence that were collected by CSI. I used a digital video recorder assigned to the Homicide Unit. The footage on the SD (HC) memory card was later copied to a USB memory device (thumb drive) and booked into evidence at Police Headquarters (see PR# 948001-2).

PHYSICAL EVIDENCE:

Numerous items of evidence were documented and collected from the crime scene located in the parking lot of Rite Aid (1125 Alhambra Blvd) and Sutter Urgent Care (1201 Alhambra Blvd). For exact location and

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descriptions of evidence collected from the scene, please refer to the CSI reports, photographs and diagrams that were completed. CSI collected all evidence at my direction and later booked it into the SPD Evidence and Property Section. All of the evidence items were assigned numbered placards and photographed, in place, with the numbered placards.

** The item numbers entered into the Sac PD Versadex System may not coincide with the placard numbers CSI assigned each item of evidence at the scene for photographs.

DEPARTURE:

On Monday 03/06/17 at approximately 2115 hours after coordinating the evidence collection with CSI personnel, the crime scene was broken down. I departed the scene at approximately 2115 hours.

DISPATCH COMMUNICATIONS:

On 03/09/17 Det. Macaulay submitted a Dispatch Activity Report request(SPD 878) to the SPD Communications Center to obtain a copy of the radio call 17-64178 and for the corresponding Sacramento Fire call as well.

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Related Text Page(s)

Document: **PROPERTY TEXT**

Author: 267 - ENRIQUEZ, ELVIA V500

Subject: CALL FROM

Related date/time: May-08-2017 (Mon.) 1524

called today to see if her brother John Hernandez could pick up his wallet. I told her there is not property release and everything was booked as evidence.

She said that her brother was not charged and that about 2 months ago, Detective Macauley said that her brother could come and pick up his wallet.

I told her to call detective Macauley and leave a message to send us a release for the wallet.

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Related Text Page(s)

Document: **PROPERTY TEXT**

Author: 659 - MEYER, JENNIFER 6318

Subject: **PER DET MACAULEY**

Related date/time: May-08-2017 (Mon.) 1550

Nothing is to be released at this time. Refer all callers to him.

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Follow Up Report # SA 1

Follow Up Report # SA 1

Assignment Information

Assigned to: **4411 - STIGERTS, TRENT 0984** Rank:

Capacity: SUPPLEMENTAL ADD (NOT FOR DETECTIVE USE) Org unit: OOO TRAINING NORTH

Assigned on: Mar-06-2017 (Mon.) 1915 by: 4411 - STIGERTS, TRENT 0984

Report due on: Mar-06-2017 (Mon.)

Submission Information

Submitted on: Mar-06-2017 (Mon.) 1631

Approved on: Mar-06-2017 (Mon.) by: 1076 - WERNER, BRADLEY D 7725

Follow Up Conclusion Follow Up concluded: **Yes**

Narrative Text Report #1

Document: **02 WITNESS STATEMENT**Author: **4411 - STIGERTS, TRENT 0984**

Subject:

Related date/time: Mar-06-2017 (Mon.) 1612

On 3/6/17, at approx. 1550 hours, I (Ofc Stigerts) contacted via telephone at 1201 Alhambra Blvd and obtained her statement. She stated the following to me in summary:

I was at the pharmacy at Rite Aid (1125 Alhambra Blvd) while my daughter was at the Sutter urgent care with her boyfriend.

I came out to my car in the parking lot of the Rite Aid and sat in my car for a few minutes.

There were 3 or 4 men in front of my car who looked like they were "tweaking" and "jerking." They were fidgeting constantly.

They walked over to a small brown car and stood around talking to one another. One man started pointing at people and objects in the parking lot. He did this for a few minutes.

The man had no shirt on, but was wearing blue jeans. His upper body was covered with tattoos.

He walked away from the brown car and sat by the curb.

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Follow Up Report # SA 1

My daughter and her boyfriend were walking back over to my car from urgent care when the shirtless man jumped at my daughter's boyfriend. I told them both to get in to the car quickly so that we could leave.

The man ran from the parking lot eventually. He put on a black Nike hooded sweatshirt.

I had never seen this man before in my life.

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Follow Up Report # SA 2

Follow Up Report # SA 2

Assignment Information

Assigned to: 3569 - MACAULAY, EDWARD 3072 Rank: DETECTIVE

Capacity: OFFENSE INVESTIGATION (DETECTIVES ONLY) Org unit: OOI MAJOR CRIMES -

HOMICIDE

Assigned on: Mar-06-2017 (Mon.) 1919 by: 1076 - WERNER, BRADLEY D 7725

Report due on: Dec-01-2017 (Fri.)

Submission Information

Checked by: 1076 - WERNER, BRADLEY D 7725

Approved on: Nov-30-2017 (Thu.) by: 1076 - WERNER, BRADLEY D 7725

Follow Up Conclusion Follow Up concluded: **Yes**

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Follow Up Report # SA 2

Related Attachment(s) - DA REQUEST

Attachment Description: ARREST WARRANT FOR (S) HERNANDEZ

Reference Number: ARR WARRANT

*** The attached file cannot be included in this hardcopy. ***

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Follow Up Report # SA 2

Narrative Text Report #1

Document: 01 VICTIM STATEMENT
Author: 3172 - GRIGGS, JEFFREY 0670
Subject: (INVOLVE-OFR #2) HIGHT, M 3
Related date/time: Mar-06-2017 (Mon.) 2143

On 3-6-17 at about 2143 HRS I interviewed OFC Hight #345 inside interview room #4 at SPD headquarters. OFC Hight's SPOA representative, Jeff Edwards (Mastagni Holstedt) was also present. The interview was video recorded and later booked into evidence under SPD PR# 947777-1. Prior to the interview I showed OFC Hight and Jeff Edwards the following ICC Video:

VEH 11669 from 14:35:45 to 14:41:15 VEH 12077 from 14:39:17 to 14:41:00

The following transcript is not a word for word interpretation of the video recording. The transcription contains the relevant content of the interview. For exact detail please refer to the recording. The following interview took place:

DET GRIGGS: All right. I'm sorry to keep you waiting. Okay. Need to go ahead and we'll start that. Yep, all right. I'm Detective (Jeff) Griggs. G-R-I-G-G-S. And I'm sorry. I forgot your name, sir.

EDWARDS: (Jeff Edwards) from Mastagni.

DET GRIGGS: (Edwards), common spelling? Were here with Officer Hight. H-I-G-H-T. This is for the transcription. What's your badge number?

OFC HIGHT: 345.

DET GRIGGS: How long have you been on?

OFC HIGHT: About 17 years.

DET GRIGGS: Seventeen years. And you're an FTO. Correct?

OFC HIGHT: Yes.

DET GRIGGS: How long have you been FTO?

OFC HIGHT: Off and on since 2004.

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DET GRIGGS: Okay. As far as - 17 years is a long time. Are you trained in any special - are you an

Academy instructor? Are you a firearms instructor?

OFC HIGHT: No.

DET GRIGGS: Use of force person or anything like that?

OFC HIGHT: No.

DET GRIGGS: Any special training? Nothing like that?

OFC HIGHT: No.

Okay. Today what was your unit identifier? **DET GRIGGS:**

I was 1-Bravo-79. OFC HIGHT:

DET GRIGGS: 1-Bravo-79. Is that your normal shift?

Yes. OFC HIGHT:

DET GRIGGS: And what time did you start?

OFC HIGHT: I started at 0600.

DET GRIGGS: 0600. What're your days off?

OFC HIGHT: Thursday, Friday, Saturday.

DET GRIGGS: Okay. You have a trainee?

OFC HIGHT: My trainee was testing for phase 4 at that time. I dropped her off at 300 at about 1

o'clock.

DET GRIGGS: Okay. Who was your trainee before you dropped her off?

OFC HIGHT: (Nelly) Moua.

DET GRIGGS: You're going to have to spell that one for me.

OFC HIGHT: M-O-U-A.

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DET GRIGGS: Officer Moua? So you dropped her off at 1 o'clock?

OFC HIGHT: Yes that right.

DET GRIGGS: Wor- but she otherwise worked the shift with you?

OFC HIGHT: Yeah.

DET GRIGGS:earlier in the morning? Real briefly we'll talk about early in your shift. Did you go on any unusual calls? Any other uses of force or anything crazy happening or stuff like that?

OFC HIGHT: No.

DET GRIGGS: Regular type day?

OFC HIGHT: Yea.

DET GRIGGS: Nothing crazy going on? Okay. And then in your own words something brought you to Alhambra and L today, just like you'd write in your observations as best you tell me what happened then we'll go back through. I'll probably have some questions. You might have some questions.

OFC HIGHT: Okay.

DET GRIGGS: And we'll just go through it just like your regular observations as to what happened. We'll start right there. Okay?

OFC HIGHT: All right. I was ju- I was sitting at Horonet and Folsom Boulevard. And I got dispatched to a subject challenging people to fight. I believe it's the Rite Aid on Alhambra Boulevard. And Dispatch sent me a too message and it said, "Sorry. Was hoping it could pend for swings but we've got three callers on this guy now."

DET GRIGGS: Okay.

OFC HIGHT: So I started to respond and Officer (Villegas) and (Dion) were dispatched also. I saw that they were coming from further away than I was so I went down Folsom Boulevard and they were coming down the freeway. So I was trying to watch the map to see - so we could make it there around the same time but they had got there a little before I did. I was probably a quarter mile out.

DET GRIGGS: Okay.

OFC HIGHT: I heard Officer (Villegas) say something on the radio when I was a couple blocks away and I couldn't make out what he said. Dispatch kept asking him what he said and then I heard - as I got to

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Folsom and - and Alhambra Officer (Dion) said, "Start a unit Code 3." I activated my Code 3 lights and siren. I went from Folsom and Alhambra to the intersection near - Rite Aid - I believe it's L and Alhambra. And as I was taking a corner turning eastbound onto L Street I observed Officer (Dion) and Officer (Villegas) at - near the front of their squad car. And I saw a subject running across the street in a southbound direction in front of my squad car, running towards the medical offices on the southeast corner.

DET GRIGGS: Okay.

OFC HIGHT: And I, I've actually been in those medical offices on calls in the past and I had gone there as a patient about 15 years ago for my arms. So I knew what kind of business it was. I was hoping that the subject would keep running outside but then I saw him go into the front doors and I thought, "Oh, this could get bad"

DET GRIGGS: Mm-hm.

OFC HIGHT: And I'm - I pulled into the parking area - the front driveway. Jumped out. Officer (Dion) beat me to the door. The glass slider door in front had jammed so we had to wait a second to go in and as I was standing there I could see the subject pushing the elevator button over and over again in the lobby trying to get in the elevator. Soon as the door opened I went in first. I had my baton in my hand because I had retrieved it from my squad car as I was getting out. And I saw the subject start to run in a westbound direction in the building down a hallway. I chased after him and was yelling for him to stop. I saw him spin around and just make hand gestures. Not - he didn't clinch his fists at that point. It was just (yelling sound). He was trying to spook us or something.

DET GRIGGS: Mm-hm.

OFC HIGHT: And I held my baton in an upper cradle and I ordered him to get down on the ground repeatedly. He turned, started running, went around - around the first corner. As I realized I had my baton in an enclosed area I re-rung my baton, took out my taser and as I came around the corner he again turned and faced us and I went to tase him because he was trying doors as he was going down the hallway and I was scared. I didn't know what was on the other side of those doors. I didn't know if it was going to be a clinic or patients' rooms or didn't know what he'd have access to and who he'd have access to.

DET GRIGGS: Sure.

OFC HIGHT: As he went around the corner I discharged my taser. One prong - I saw that for sure strike him. And I at the time did not see if I hit him with both.

DET GRIGGS: Mm-hm.

OFC HIGHT: But it was no reaction. He didn't even look like he affected at all.

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DET GRIGGS: Mm-hm.

OFC HIGHT: And he kept running down the hallway and turned around a corner to the left. Officer (Dion) and I proceeded down and as we came around the corner I saw he was trying a door. And then turned and - and faced off with us and actually squared up and had his fists raised. And I saw - since his hands were empty I used that to my advantage and I basically just drove my shoulder into him, bouncing him off the wall or the door. And he started to go down and Officer (Dion) and I both jumped on top of him. When we were going for his arms he was able to roll over on his back and I still had my taser in my hand. And he was trying to kick and hit at us. So I looked for an area. I believe the first place that I was able to get his was his side or in the back. So I tried a drive-stun. No reaction. He didn't seem to even react. He I made sure it was working. I looked, you know, it was arcing. I drive-stunned him again. He again didn't react. Officer (Dion) and I were trying to pull his arms behind his back. At that point Officer (Villegas) came in to help us and he had his taser out. And he came to reach in to get the subject in the upper back and my hand was right there so I was quick to move my hand 'cause I didn't want to get tased. And I don't know if Officer (Villegas) actually pulled the trigger. He put the taser up against him but I don't recall if he actually drive-stunned him or not. And then I remember Officer (Villegas) taking out his collapsible baton, holding it with both hands and he's telling the subject to stop fighting. And the subject's still turning on us. I can't get his arm. And Officer (Villegas) began striking him in the upper back area with the baton, driving it into his shoulder, telling the subject to quit fighting and it didn't - seemed like it had no reaction on him. I again had my drive-stun put into his back. Did the drive-stun. Didn't seem to - he yelled at one point and I remember during this time I said, "I don't think he's feeling it." And the subject actually said, "Oh, I can feel it." And it - it was almost like it was nothing to him. He was just having a conversation with us at that point.

DET GRIGGS: Okay.

OFC HIGHT: I went for his arm at one point with the drive stun because I thought maybe I wasn't getting a good connection because it was through a sweatshirt.

DET GRIGGS: Mm-hm.

OFC HIGHT: And I tried it in the arm. He seemed to let u- let out a little better reaction - a little bit of a yell but still continued to swing and kick...

DET GRIGGS: Uh-huh.

OFC HIGHT: ...and wouldn't give up his arms. And then with the three of us on top of him at that point I noticed that he did have a handcuff on one hand. They were able to get one but when I went for the other hand to try and handcuff that (Dion) was able to get that arm behind his back finally and the subject was able to grab the cuff and hold it really tight. And so I was trying to pry his fingers open...

DET GRIGGS: Uh-huh.

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OFC HIGHT:	to get the handcuff out of his grasp so I could cuff him. He continued to resist. I			
drive-stunned him in his	shin area at one point because it was available. And he let out a little bit of a yell but			
didn't pull his leg away from me or seem like he really was reacting to it.				
DET GRIGGS:	Okay.			
OFC HIGHT:	So at that point I was done with the taser. I was able - I went back and concentrated			

the handcuff and after a good struggle with using both hands to really try and force it I was able to get the second

DET GRIGGS: Okay.

handcuff on him finally.

OFC HIGHT: Officer (Allison Cunningham) showed up at one point and wanted to help. And I said, "Grab his legs." 'Cause he kept kicking at us. And the three of us were basically on top of him trying to hold him down. She took his legs and he was still trying to push her off. And then more officers showed up. I don't know who came in next.

DET GRIGGS: Sure.

OFC HIGHT: But I remember they said, "Tap out." So me and Officer (Villegas) backed out of the fray and they went in to try and help subdue him. I backed out. I had no more physical contact with the subject at that point. And then...

DET GRIGGS: He was already handcuffed when you backed out?

OFC HIGHT: Yeah when I got out he - I had already got the second handcuff on him.

DET GRIGGS: But - but he's still fighting.

OFC HIGHT: Yeah he still resisting. He's still lifting his legs. (Allison)'s struggling to hold his legs. (Dion)'s still on top of him trying to hold him down and the guy's moving. I mean, the whole pile looked like it was moving. The guy was still moving. Everybody.

DET GRIGGS: Okay.

OFC HIGHT: And he was strong.

DET GRIGGS: Okay.

OFC HIGHT: (Dion)'s bigger than me. Ish (OFC Villegas) weighs a good amount. I mean, we - the three of us are decent-sized guys and he was throwing us around like rag dolls.

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DET GRIGGS: Okay. When was it over? At what point was what do you when you backed out, what did you do? Where'd you go?

OFC HIGHT: I backed out and more officers showed up.

DET GRIGGS: Uh-huh.

OFC HIGHT: I told one of the trainees, Officer (Harrison) - I said, "Get in there." 'Cause I wanted somebody to relieve (Casey).

DET GRIGGS: Uh-huh.

OFC HIGHT: (Dion). 'Cause he'd been in there as long as I had.

DET GRIGGS: Uh-huh.

OFC HIGHT: And he stayed in it longer. And then finally (Casey) came out and new officers took over just holding the subject down. I backed away a little bit. I heard someone say something about, "We need to watch out for excited delirium."

DET GRIGGS: Uh-huh.

OFC HIGHT: Which we're all familiar with. And then I remember seeing - we were waiting for Fire. And Officer (Piaz) - the subject was face-down, handcuffed and Officer (Piaz)'s partner had his hand on the middle of the shoulder blades.

DET GRIGGS: Mm-hm.

OFC HIGHT: Not holding him down but just feeling his breathing.

DET GRIGGS: Mm-hm.

OFC HIGHT: And Officer (Piaz) was walking through, "check his breathing."

DET GRIGGS: Mm-hm.

OFC HIGHT: "Make sure that he's still doing it." And Officer (Piaz) was holding his legs to make sure he didn't kick anymore.

DET GRIGGS: Mm-hm.

OFC HIGHT: And I remember watching and the subject appeared to be breathing.

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Uh-huh. **DET GRIGGS:**

OFC HIGHT: And he was still trying to push with his legs with Officer (Piaz) on them.

DET GRIGGS: Okay.

OFC HIGHT: So I was still watching his - the way he was reacting. And then that seemed to go on

for a minute or two.

DET GRIGGS: Mm-hm.

OFC HIGHT: And then finally literally Fire came in the door and started walking towards us and Officer (Piaz) and his partner I believe started to sit him up - sit the suspect up and that's when they noticed that it seemed like his breathing was labored.

DET GRIGGS: Mm-hm.

OFC HIGHT: Fire came over, started taking a look and said, "It looks like his hands are changing colors." And they said, "Let's get some monitors on him." And then when they laid him down they asked us to handcuff him in the front so they could get better access and I didn't - I still didn't have anymore - I just stood back and watched. And Fire said, "Oh, let's start compressions." So that's when we all gave each other a look like, "Oh, crap."

DET GRIGGS: Mm-hm. Okay. Do you know who called for Fire?

OFC HIGHT: I don't recall.

DET GRIGGS: Did you make any calls for Fire?

OFC HIGHT: I didn't get on the radio and ask for Fire.

DET GRIGGS: Okay. But when - at some point Fire was called. Was it - why was that?

OFC HIGHT: I do actually remember Officer (Womack) was there.

DET GRIGGS: Mm-hm.

OFC HIGHT: And he said, "Do we start Fire for you guys?" And I said, "I think we're all okay but

Fire is coming for him. Right?"

DET GRIGGS: Mm-hm.

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OFC HIGHT: And he goes, "Oh, I - I'll see." And I don't remember him - but I remember that conversation taking place.

DET GRIGGS: Was that the normal course of business as precautionary? Was it in response to some symptoms that he was showing?

OFC HIGHT: It was precautionary because I've been on an actual in custody death before...

DET GRIGGS: Okay.

OFC HIGHT: ...where I was the supervisor at the time.

DET GRIGGS: Mm-hm.

OFC HIGHT: And I went through that whole process and I remember as I pulled into the parking lot that time they were starting compressions on him.

DET GRIGGS: Mm-hm.

OFC HIGHT: And so we all I think know what to watch for.

DET GRIGGS: Mm-hm.

OFC HIGHT: And that strength isn't normal.

DET GRIGGS: Right.

OFC HIGHT: So he was showing all the obvious signs of being under the influence of something.

DET GRIGGS: Okay. Are you injured at all?

OFC HIGHT: I just got a scratch on my finger.

DET GRIGGS: Okay. Soreness anywhere or any kind of bruising?

OFC HIGHT: My legs are sore but I don't see any marks on them. I think it's just from hitting the

ground.

DET GRIGGS: Okay. Let's back up and I -- forgive me. I forgot to ask you about what force options you had at the beginning. So as far as what you have on your belt - what equipment you carry, what - what you have available to you?

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OFC HIGHT: I have my pepper spray...

DET GRIGGS: Okay.

OFC HIGHT: ...my wood baton. I don't carry the collapsible anymore...

DET GRIGGS: Okay.

OFC HIGHT: ...to try and alleviate the weight when I'm in the squad car on my hips.

DET GRIGGS: Sure

OFC HIGHT: And then I have basically my firearm and my CED.

DET GRIGGS: Okay. Nothing else?

OFC HIGHT: A knife but that's just last resort.

DET GRIGGS: Right. Where do you normally keep your baton?

OFC HIGHT: On my left side.

DET GRIGGS: Is it - is it always there throughout your shift or do you take it out and put it away.

OFC HIGHT: I take it out each time I get into the squad car.

DET GRIGGS: Okay.

OFC HIGHT: And I put it next to the driver's seat or wherever I'm sitting. It goes next to my seat and then when I get out of the car I re-ring it.

DET GRIGGS: When you say next to your seat are you talking about - I remember putting the baton in the - the map holder and it would stick out.

The new cars don't have that. OFC HIGHT:

DET GRIGGS: Okay.

OFC HIGHT: So I just lay it - it's almost on the floor...

DET GRIGGS: Okay.

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next to the seat right up next to the door.
Okay.
Between the door and the seat.
Okay. So when you get out of the car
I retrieve it. Usually I'll re-ring it before I go into a call.
Okay.
I mean, this instance - because the guy was actively running and I was coming in - I'm o get out I just grabbed it and I had it - I was holding it in my right hand.
Okay. All right. Let's back up a little - little further. You said you had - messaged or messaged you about this call had been pending or something to that effect. Had you ions about whatever was going on prior to being dispatched to it or
No.
So you got dispatched to the call. She wanted to hold it for swings but it didn't - she u?
That it was getting worse. That she had got three callers.
Okay.

that, updates that more people were calling in from Rite Aid saying that he was acting, I don't remember the

DET GRIGGS: That call came from Rite Aid as far as you knew?

OFC HIGHT: Yeah.

wording that it used on the call.

OFC HIGHT:

Okay. Any other details that you can remember as far as... **DET GRIGGS:**

OFC HIGHT: That he had put on a hood...

DET GRIGGS: Okay.

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The initial call said, "Subject challenging people to fight." And then it starts saying



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OFC HIGHT:

...prior to - while we were on - en route it - there was updates saying that he had put on

a hooded sweatshirt.

DET GRIGGS:

Did they give a description at all that you remember?

OFC HIGHT:

I just remember male Hispanic wearing a hoodie.

DET GRIGGS:

Okay. I'll show you a picture. Is that the guy we're talking about?

OFC HIGHT:

Yes.

DET GRIGGS:

You ever had any experience with him before that you remember?

OFC HIGHT:

No.

DET GRIGGS:

You know his name?

OFC HIGHT:

No I never did get it.

DET GRIGGS:

When you first pulled up were your windows in your squad car open or closed?

OFC HIGHT:

Closed because I was going Code 3.

DET GRIGGS:

Right. Could you hear Officer (Dion) or Officer (Villegas) say anything or giving

commands or anything like that?

OFC HIGHT:

No I just remember (Dion) saying, "Give us unit Code 3."

DET GRIGGS:

Okay.

OFC HIGHT:

And then I came around the corner and saw - as he was running I remember - I don't know if it was as I was getting out of the car or prior to that. I remember (Dion) saying on the air that he's

running.

DET GRIGGS:

Okay. (Detective Hunkapiller came inside the interview room and handed me an overhead map of the area) Thank you. I - I don't - this is - this is an overhead map of the facility there but I don't

know that we need to go through this. You said you've been there before and...

OFC HIGHT:

Yeah.

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DET GRIGGS: ...and you're familiar with the building and anyway so when you first pull up you don't hear (Casey) or (Villegas) saying anything to the - the person?

OFC HIGHT: No.

Do you have any idea why he's running or - or... **DET GRIGGS:**

OFC HIGHT: No. I - I knew they had asked for a unit Code 3.

DET GRIGGS: Okay.

OFC HIGHT: And then I saw the - a male Hispanic wearing a hoodie start to run across the street

from the officers.

DET GRIGGS: Uh-huh.

OFC HIGHT: So automatically I went to intercept.

DET GRIGGS: Okay. And then he gets inside. You see him pushing the - the elevator...

OFC HIGHT: Mm-hm.

DET GRIGGS: ...button. You guys get stopped by the door and kind of a chase ensues. During that

time are you giving him any kind of commands?

OFC HIGHT: As I got into the building I was yelling for him to get on the ground.

DET GRIGGS: Mm-hm.

OFC HIGHT: And like I said, he grunted at us and made hand gestures, stood in our way.

DET GRIGGS: Mm-hm.

OFC HIGHT: But he didn't actually, like, clinch his fists like he wanted to fight the first time.

DET GRIGGS: So he turned around and was he looking at you...

Yeah. OFC HIGHT:

DET GRIGGS: ...or was he running away the whole time?

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OFC HIGHT:

No he turned. He faced us. I had my baton in my hands and that's when I told him to

get on the ground.

DET GRIGGS: And you were dressed as you are now?

OFC HIGHT: Yes. In full police uniform.

DET GRIGGS: Okay. And then he took off running again down the hall?

OFC HIGHT: Yeah.

DET GRIGGS: Do remember (Casey) - (Dion) saying anything to him or giving him any kind of

commands?

OFC HIGHT: I don't recall what he said.

DET GRIGGS: Did he say anything other than grunting that you remember?

OFC HIGHT: Not that I can recall when we were chasing him down the hallway.

DET GRIGGS: Okay.

OFC HIGHT: And it just - when he did say certain things it was not, like, full sentences. It would just be a word here and there. The - I can't even give an example of what it was. I just remember he didn't seem to be making any kind of sense.

DET GRIGGS: Okay.

OFC HIGHT: And...

DET GRIGGS: In your assessment of him and what you observed of him in that very short period of time what was going through your head? What did you think of him?

OFC HIGHT: I thought he was high. He was very agitated. He was running from us. He was erratic. He wasn't making any sense when he was saying things. He was facing off with us -- squaring off with us.

DET GRIGGS: Mm-hm.

OFC HIGHT: Obviously didn't car that the police were chasing him and I was worried what he was going to get into in that building.

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DET GRIGGS: In - in your 17 years of police experience is a person like that -- how do I word the question? Is that a dangerous individual?

OFC HIGHT: Absolutely.

DET GRIGGS: Is he predictable?

OFC HIGHT: No.

DET GRIGGS: Okay I'm sorry. Back up. We go - you're chasing him down the hallway. You ring the

baton because...

OFC HIGHT: Close quarters.

DET GRIGGS: ...switching force options. And you draw your taser.

Mm-hm. **OFC HIGHT:**

DET GRIGGS: At - at what point did you decide to fire your taser at him?

OFC HIGHT: As we got to the corner and he had turned on us again.

Mm-hm. **DET GRIGGS:**

OFC HIGHT: And then...

EDWARDS: So is this past the elevator?

OFC HIGHT: Yes. This is - the first time he turned around in the hallway sq-didn't square off. That's when he did the weird grunt and I had my baton and I was ordering him to get on the ground. And he turned around, started to run again. I re-rung my baton, took out my taser. As he went around the first corner he turned around on us and I raised my taser at that point and he started to run again when I discharged it.

DET GRIGGS: Mm-hm.

OFC HIGHT: I just didn't want to get any further into the building 'cause I didn't know what he was going for so I tried to tase him there. And another thing that I forgot to add, later was when I said that one of my darts did hit him. Later on after he had been detained I went down the hall to look for my cartridge and I saw that the second dart had actually gone into the wall - into the drywall and it was still stuck in there.

DET GRIGGS: And earlier you said that first shot had no effect or seemed to have no effect.

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OFC HIGHT: Yeah. I'm assuming it's because he didn't get the full circuit.

DET GRIGGS: When - when you fire that first round do you remember - did you let it cycle or do

you remember? Because what happens when you fire your taser?

OFC HIGHT: When you fire it it's supposed to cycle five seconds.

DET GRIGGS: Do you know if you let it cycle five seconds?

OFC HIGHT: I believe I - I just let it go. And then when I realized that he was still running and it

didn't affect him that's when I took the cartridge out and...

DET GRIGGS: Okay.

OFC HIGHT: ...dropped it...

DET GRIGGS: Okay.

OFC HIGHT: ...just discharged it so that I would have the touch-stun available.

DET GRIGGS: Okay. And you still had it in your hand?

OFC HIGHT: Yes.

And at that point is that when he got into the doorway and you said you drove your **DET GRIGGS:**

shoulder...

OFC HIGHT: Yeah.

DET GRIGGS: ...into him? Let's talk about that. So are you and (Casey Dion) shoulder to shoulder?

Is one following the other? How did that work?

OFC HIGHT: I remember him being next to me...

DET GRIGGS: Okay.

OFC HIGHT: ...at points. I don't remember at that exact moment where he was.

DET GRIGGS: Mm-hm.

OFC HIGHT: But as I was on the left side of the hallway he was to my right.

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DET GRIGGS: Mm-hm.

OFC HIGHT: The subject was around the corner to our left and as we came to the corner I could see

the subject trying the door.

DET GRIGGS: Mm-hm.

OFC HIGHT: And then he turned and squared off with us. And I - I saw that his hands were empty so I thought, "Well, I'm going to have to get in there at some point to try and stop this guy." So I just - I basically did

a shoulder...

DET GRIGGS: Mm-hm.

OFC HIGHT: ...and I rammed him and he bounced off the door and went to the ground.

DET GRIGGS: You said he went to the ground. Did he - how did he go to the ground?

OFC HIGHT: He fell...

DET GRIGGS: Like...

OFC HIGHT: ...from the force of me...

fall on his?

DET GRIGGS:

OFC HIGHT: No he was facing me...

Uh-huh. **DET GRIGGS:**

OFC HIGHT: ...when I drove my shoulder into him. And then I saw him start to fall. I believe it was

No I get that, but- which side? Did he fall on his back? Did he fall on his side? Did he

to his right side.

DET GRIGGS: Okay. And then at that point you guys are down on the ground with him. And you

said he was on his back.

OFC HIGHT: He was able to roll and face us. Yeah.

DET GRIGGS: Okay. Are you, I mean, what's going on? He's on the ground on his back. Are you

guys standing over him? Are you...

OFC HIGHT: I was to the right. (Casey) was to my left.

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DET GRIGGS: Okay.

OFC HIGHT: And we were trying to roll the subject over so we could cuff him.

Mm-hm. **DET GRIGGS:**

EDWARDS: So were you in kind of, like, a squatted position or...

OFC HIGHT: Yeah my knees were on the ground. I know - I (unintelligible) know 'cause my knees are a little sore and so I was on the ground trying to help get his arms behind his back.

Mm-hm. **DET GRIGGS:**

OFC HIGHT: And that's when - since I had the taser in my hand...

DET GRIGGS: Mm-hm.

OFC HIGHT: ...that's when I attempted to do the drive-stun.

DET GRIGGS: And what was he doing during that time?

OFC HIGHT: He was - had his hands in front of him so he was actively trying to fight us off.

DET GRIGGS: Mm-hm.

OFC HIGHT: And I remember he kicked at one point.

Mm-hm. **DET GRIGGS:**

OFC HIGHT: But it was - his legs were going to my left so he was kicking towards (Casey).

DET GRIGGS: Mm-hm.

OFC HIGHT: And he was trying to get his hands at us.

DET GRIGGS: Okay. Do you remember where you drive-stunned him?

OFC HIGHT: I know that I - I don't remember specifically other than in the upper back...

DET GRIGGS: Okay.

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OFC HIGHT: ...the side and then I know...

DET GRIGGS: I'm - I'm talking about at that - that point.

That exact time? OFC HIGHT:

DET GRIGGS: I don't want you to guess so just if you remember you remember.

OFC HIGHT: I believe it was his upper back.

DET GRIGGS: Okay. That have any effect?

OFC HIGHT: No.

DET GRIGGS: Okay. Do you know if it made contact?

OFC HIGHT: I was pushing it in. He had a sweatshirt on and I - I could hear it and that's what I said earlier is I pulled the trigger and it was in and I didn't see a reaction out of him so I actually looked to make sure that it was arcing - that it was on.

DET GRIGGS: Mm-hm.

OFC HIGHT: And then I tried again.

DET GRIGGS: Was that during that first drive-stun where you looked?

OFC HIGHT: Yes.

DET GRIGGS: Okay. And when you say tried again, was it another shock or was it just that same one that was still cycling?

OFC HIGHT: No I pushed it in and pulled the trigger again.

DET GRIGGS: Okay. And from there what - what was he doing?

OFC HIGHT: He was still on his back trying to get us off of him...

DET GRIGGS: And - and...

OFC HIGHT: ...and wouldn't give up his arms.

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DET GRIGGS: Are you having any communication with Officer (Dion) about what's going on or what each of you should do or - or is there any communication as far as...

No we - we're both just telling him to give up, to stop fighting, stop resisting. **OFC HIGHT:**

Okay. And it's just the two of you at that point. Right? **DET GRIGGS:**

OFC HIGHT: Yeah at that moment.

DET GRIGGS: Okay. And from there what - what...

OFC HIGHT: And then that's when Officer (Villegas) came in...

DET GRIGGS: Okay.

OFC HIGHT: ...and came from the left and was going to attempt to drive-stun him.

DET GRIGGS: Mm-hm.

OFC HIGHT: And that's when I - I moved my hand out of the way 'cause I didn't want to get tased.

DET GRIGGS: Mm-hm.

OFC HIGHT: Another thing that I - I'm remembering now - when me, Officer (Villegas) and (Dion) were all trying to subdue the subject I did a drive-stun to his - I believe it was the middle of this back.

Mm-hm. **DET GRIGGS:**

OFC HIGHT: And I was holding his - I believe it was his left arm and so was (Casey).

DET GRIGGS: Mm-hm.

OFC HIGHT: And we both felt the taser. 'Cause I remember I felt it and (Casey) said, "Oh, I can feel the taser. I got tased." And it was from - I was drive-stunning him in his back so I don't know what was closing the circuit...

DET GRIGGS: Mm-hm.

OFC HIGHT: ...that we were actually feeling it.

DET GRIGGS: Mm-hm.

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OFC HIGHT: But we both got a pretty good jolt.

DET GRIGGS: And this is through his sweatshirt not into his...

OFC HIGHT: At that point it was the sweatshirt. Yeah.

DET GRIGGS: Okay. Okay. From there it's just - is this just kind of a fight that keeps going on? Is he still on his back the whole time or does he...

OFC HIGHT: We were able to roll him over a couple times and he's still trying to get back. They - I don't know at what point they got his hand handcuffed...

DET GRIGGS: Mm-hm.

OFC HIGHT: ...with one cuff but then the arm was loose again and it was all over the place and that's when the cuff was loose and he - when I went to retrieve it to cuff him that's when he was holding onto the cuff and I couldn't.

DET GRIGGS: Do you know about - I don't want you to guess when that hand was cuffed, Did he had that loose for a while or was it - you know what I mean? Was he swinging around at you?

OFC HIGHT: He couldn't really swing it around 'cause he had all of us on top of him.

DET GRIGGS: Right.

OFC HIGHT: But it was - it was loose for a while.

DET GRIGGS: And that's when he grabbed the handcuff.

OFC HIGHT: And - yeah behind his back he was holding the open handcuff...

DET GRIGGS: Mm-hm.

OFC HIGHT: ...with - with a real tight grasp so I couldn't pry his finger off of it.

DET GRIGGS: And all this - is all this taking place in the same spot or are you moving up and down

the hallway?

OFC HIGHT: Yeah. We're - we're literally right in the corner of - between the wall and the door in

a...

DET GRIGGS: Uh-huh.

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OFC HIGHT: ...in a 45-degree -- I'm sorry -- a 90-degree corner.

DET GRIGGS: Okay. And what - what happened after that?

OFC HIGHT: I attempted multiple other drive-stuns at one point to his arm and another one to his

leg.

DET GRIGGS: Mm-hm.

OFC HIGHT: And that's when I had said, "I don't think he can feel it." And he said, "I can feel it."

DET GRIGGS: Mm-hm.

OFC HIGHT: And I realized this thing is just not working.

DET GRIGGS: Okay.

OFC HIGHT: So that's when I stopped my attempts at tasing him.

DET GRIGGS: Okay. Do you know if Officer (Villegas) or Officer (Dion) tasered him other than the

one thing you told me about Officer (Villegas) trying? Did you see them taser him at all?

OFC HIGHT: I remember hearing the taser. I don't remember seeing who did it or...

DET GRIGGS: Okay.

OFC HIGHT: ... where they did it at but I remember the other - another taser. I could hear it arcing.

DET GRIGGS: Okay. How long you think all this was going on?

OFC HIGHT: It felt like a minute a least.

DET GRIGGS: Start to finish?

OFC HIGHT: From the actual fight itself?

DET GRIGGS: Uh-huh.

OFC HIGHT: It seemed to take a little bit for other officers to get there with us because at one point I turned - when we were on top of him I turned and looked and there was a security guard and a really tall male black. I believe he was wearing, like, surgical scrubs...

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DET GRIGGS: Mm-hm.

OFC HIGHT: ...and a - a hair cap.

DET GRIGGS: Mm-hm.

OFC HIGHT: And when I turned and looked at them he said, "Do you need more backup?" And we told him, "Yeah go tell our backup where we're at."

DET GRIGGS: Okay.

OFC HIGHT: So then I saw him and the security guard go down the hall to try and go get us help or

to flag another officer.

DET GRIGGS: Now earlier you said you didn't make any -- or did you? Did you make any radio

transmissions?

OFC HIGHT: I did not.

DET GRIGGS: Do you know if (Casey) did?

OFC HIGHT: Just - the only one I remember is when hi- when he said the guy was running and going

towards the medical office.

DET GRIGGS: And that was when you were still in your car?

OFC HIGHT: I don't remember if it was before I was out of the car or right as I was getting out of the

car.

It was at the beginning. **DET GRIGGS:**

Yes. **OFC HIGHT:**

DET GRIGGS: As far as your involvement. Do you remember hearing anything on the radio inside?

OFC HIGHT: You could hear a lot of s- just couldn't understand it.

DET GRIGGS: Uh-huh.

OFC HIGHT: 'Cause I think it - we didn't have good reception in there.

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DET GRIGGS: Okay. Was that a concern at all?

OFC HIGHT: I felt comfortable enough that we had three of us that we could at least - even though we couldn't get him handcuffed for a while I felt that we could hold him there until more officers arrived.

DET GRIGGS: Okay.

OFC HIGHT: So I didn't try and go out on the radio. I - it was - the guy was so strong...

DET GRIGGS: Mm-hm.

OFC HIGHT: ...that we had to use both hands. There was no, you know, real time to try and key up

anyway.

DET GRIGGS: Okay.

OFC HIGHT: And I figured - I knew everybody was coming 'cause they had put out that we needed

units Code 3.

DET GRIGGS: Could you hear sirens or anything like that or...

OFC HIGHT: No.

DET GRIGGS: Okay. And that struggle just kinda continued until somebody tapped you out or...

OFC HIGHT: Yeah we were getting really tired...

DET GRIGGS: Okay.

OFC HIGHT: ...'cause the guy just wasn't letting up.

DET GRIGGS: Okay. Was he saying anything while he was on the ground there or...

OFC HIGHT: He just - like I said, he - he would say, "I give up. Okay I - I give up." And then he

would try and push us off of him or kick at us and he wouldn't give up his arm.

DET GRIGGS: Do you have anything else?

EDWARDS: No.

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DET GRIGGS: I think we'll take a break and then we'll probably come back for a few minutes. I - I'm sure I forgot something I was supposed to ask you but it's not coming to me. Let's take a break and we'll come back.

(BREAK)

DET GRIGGS: All right. We're back. Just to clear up stuff, we talked a little about the suspect's - what you perceived of him and his demeanor. Did you notice, like, correct me if I'm wrong but you said he appeared to be high.

OFC HIGHT: Yeah.

DET GRIGGS: What did any - any symptoms in particular that you noticed or observed from him? Just, you know, anything that he displayed?

OFC HIGHT: Just his unusual strength, his erratic behavior, his not making sense when he talked or making noises, just his behavior all around.

DET GRIGGS: And you've dealt with people like that before?

OFC HIGHT: Absolutely.

DET GRIGGS: When you say unusual strength - describe that for me and - and - to the best of your ability. What - do you know why that is or...

OFC HIGHT: The - I deal with people that are high all the time and they get almost superhuman strength or they don't feel pain.

DET GRIGGS: Mm-hm.

OFC HIGHT: So when I was tasing him and he wasn't feeling it I - that was another reason that I thought that he must be high...

DET GRIGGS: Okay.

OFC HIGHT: ...'cause he just wasn't reacting.

DET GRIGGS: And I think I asked already so forgive me. But did you ever remember him saying anything coherent to you that you could understand?

OFC HIGHT: Just the part where he said, "I give up."

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DET GRIGGS: Okay.

OFC HIGHT: And then not giving up. And when he said - when I said that he couldn't feel it...

DET GRIGGS: Uh-huh.

OFC HIGHT: ...and he said, "Yeah I can feel it." Or something along those lines.

DET GRIGGS: Okay. And other than that he didn't communicate with you guys at all that you

remember?

OFC HIGHT: Not that I remember. No.

DET GRIGGS: You said a few times he would - you turned and he was grunting towards you?

OFC HIGHT: Yeah.

DET GRIGGS: Was that just on those occasions or was that kind of a theme throughout this?

OFC HIGHT: It was theme when he was on the ground. Like I said, he wasn't saying sentences or...

DET GRIGGS: Uh-huh.

OFC HIGHT: ...making sense so he making noises when we were trying to detain him.

DET GRIGGS: Okay. And that just is going on in the hallway there on the ground. Talk to me about your fatigue. You mentioned you guys were getting kind of tired. When - when do you remember that becoming a concern of yours?

OFC HIGHT: When we couldn't get his other arm behind his back I remember taking a breath and my hands were shaking from the adrenaline.

DET GRIGGS: Mm-hm.

OFC HIGHT: And then I had to use both of my arms to pull the cuff close enough to his other wrist

to try and handcuff him.

DET GRIGGS: Mm-hm.

OFC HIGHT: And, I mean, I'm not a small guy. I wouldn't expect to have to use both arms and all

my strength to try and handcuff somebody.

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DET GRIGGS: Mm-hm.

OFC HIGHT: And like I said, - (Dion)'s a big dude and he was straining too.

DET GRIGGS: Mm-hm.

OFC HIGHT: We were all breathing heavy. We were all really disheveled. Officer (Villegas)' uniform was completely come, you know, untucked. His radio was - actually came out of his holster and was laying on the ground. It was just - we were spent by the time the other guys came.

DET GRIGGS: Okay. What did - how'd you feel when you got back up there and I guess they tapped

you out?

OFC HIGHT: I just had to catch my breath.

DET GRIGGS: Okay.

OFC HIGHT: And I was watching to see what was going to happen next. I knew he was handcuffed and I was thinking excited delirium too.

DET GRIGGS: Mm-hm.

OFC HIGHT: So that's why I kinda just stood in the area and watched and I saw that it seemed like the officers had everything under control and knew exactly to watch for the same things.

DET GRIGGS: Okay.

OFC HIGHT: And the fact that they were just not applying any pressure and just feeling on his back to make sure they could feel his breath so I thought it was pretty good.

DET GRIGGS: In your mind he was take- being taken care of...

OFC HIGHT: Yeah.

DET GRIGGS: ...as far as after force care?

OFC HIGHT: Yeah.

DET GRIGGS: Okay. I think that's it unless you've got anything else?

EDWARDS: I just wanted to follow up 'cause I think - I think something is apparent to you but you were talking about superhuman strength. What was the guy's build like?

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OFC HIGHT: He was short and stocky. He might've been a little bit bigger than me muscle-wise and I think he was about the same height.

EDWARDS: Was he manifesting more strength than you'd expect for his build?

OFC HIGHT: Yes. The fact that he was - we couldn't - the three of us could not get his arms behind his back it was really - it - it blew my mind that we couldn't get him detained.

EDWARDS: Okay.

DET GRIGGS: Anything else?

EDWARDS: No.

DET GRIGGS: All right. Do you have any questions?

OFC HIGHT: No.

END

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Follow Up Report # SA 2

Narrative Text Report # 2

Document: 01 VICTIM STATEMENT Author: 31 - AYERS, SHAWN E 3002 Subject: (INVOLVE-OFR #3) DIONNE, C 3

Related date/time: Mar-06-2017 (Mon.) 2145

On Monday, 3-6-17 at approximately 2145 hours, I, Detective Ayers #763, interviewed Officer Dionne #395 inside interview room #2 at the Sacramento Police Department headquarters, located at 5770 Freeport Boulevard. Officer Dionne's SPOA representative, Kevin Wiemer (Mastagni Holstedt Law Firm) was also present. The interview was audio and video recorded and later booked into evidence (PR# 947774-1). Prior to the interview I showed Officer Dionne and Attorney Kevin Wiemer the following ICC Video:

- VEH 12076
- VEH 11282
- VEH 12077

The following transcript is not a word for word interpretation of the video recording. The transcription contains the relevant content of the interview. For exact detail please refer to the recording. The following interview took place:

INTERVIEW WITH OFFICER C. DIONNE #395

Q=Detective Ayers
A=Officer Dionne
A1=Attorney, Kevin Wiemer

A1: Okay. Before we get started I was under the impression that Officer Dionne was making a statement for the impression that the video is not going to be released to the public.

Q: Correct.

A1: Thank you.

Q: Okay so before we get started let me introduce myself. I'm Shawn Ayers I'm with the homicide division and we are going to go ahead and get started with the interview. It is 2145 on March 6, 2017. Case number 17-64178. This is regarding an incident that took place at 1201 Alhambra Boulevard. Okay Officer can you state your name full name and spell it for me please.

A: Casey Dionne. C-A-S-E-Y D-I-O-N-N-E

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Q: Okay and we're also represented by

A1: (Kevin) Wiemer W-I-E-M-E-R with Mastagni.

A: Your first name is Kevin correct?

Yes. A1:

Q: Okay. So Casey I see that you're in full uniform here. Is that what you were wearing here today?

Yes. A:

Okay and you are currently employed by who? O:

City of Sacramento Police Department. A:

Q: And how long have you been employed by the police department?

A: Over eighteen years.

Eighteen years? Have you ever worked at any other law enforcement agency? Q:

No. A:

What is your current assignment? Q:

A: Patrol East Day Shift, currently assigned as 1-Bravo-89 (1B89).

A1: I apologize. Do you mind if I record?

O: Go ahead. Okay so that was Patrol East. You were working as 1-Bravo-89 (1B89). What are your

days off?

A: Thursday, Friday, Saturday

Q: And what sergeant do you work for?

Robert Quinn A:

Okay. What prior assignments have you had prior to your patrol, anything else? Q:

A: Nothing else.

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Q:

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Follow Up Report # SA 2 Q: Okay. All patrol. Any specialized training FTO, range master? A: I've been an FTO before. I'm not currently one though. Okay. And when you were an FTO, how long were you an FTO? Q: A: A few years. Q: A few years. A: I'm not sure. Q: Okay. Two, three? A: Approximately. Q: And how long ago was that? A: During the hiring freeze so? 2009, 2010? Does that sound about right? Q: A: Yeah. Anything else? Use of force instructor, range master? Q: A: Nope. Okay. Have you been in any in or formalized training outside of the department? Q: No. A: Q: Okay. Any military experience. A: No. Okay. So with your uniform do you wear a ballistic vest? Q: A: Yes.

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And what else do you wear with your uniform?

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Follow Up Report # SA 2

Tollow Op Report # 5A
A duty belt.
Okay. And you were wearing one during your shift today?
Yes.
Okay. So if you can describe your duty belt from basically the center going to the right, or dominant side is. So are you right-handed?
Yes.
Okay. So then your gun, I assume you carry on that side.
Keys are first.
Okay.
Then my gun, pepper spray, radio, CED, and extra ammo packs which I carry two of, magazines. the absolute first thing I should have said was handcuffs.
Handcuffs?
Yeah.
So that's before the keys.
Yes.
Okay. So let me just go ahead around again so you got handcuffs, keys, a gun, pepper, your radio which is the conducted energy device
Correct.
extra magazines.
Correct.
Okay. So what type of duty gun do you have?
Sig Sauer P226R.

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Q:

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	REQUESTED
Q:	Follow Up Report #SA 2 Okay and what caliber is that?
A:	40
Q:	Do you carry any backup weapons?
A:	No.
Q: dispatched to	Okay. So as we're getting to the incident that you were dispatched to, I'm assuming you were it?
A:	Yes.
Q:	How did that come in and where were you?
A:	I forget the name of the park. It's a park off of La Riviera in 6E.
Q:	Is that where you were at when you received the call?
A:	Yes.
Q:	Okay. I'm sorry that was La Riviera and 60th?
A:	No 6E.
Q:	Okay 6E.
A:	Yeah. It might be Rinwood Park or something similar.
Q:	Okay. So how did that call come in?
A: to fight them	It came out as a male, Hispanic, either shirtless or with a black sweater running up to people trying . And I don't remember if it came as a 415 or a 242 type thing.
Q:	Now are you the primary unit being dispatched or are there a couple units being dispatched?
_	At first me and Hight who was 1-Bravo-79 (1B79) were dispatched. I was actually parked next who was 1-Bravo-78 (1B78) when the call came out and he was just clearing his last call. So he had at I pressed 9-0-9 and then as I was reading more into the call I put myself back onto the call so on

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the call it'll show me off and on the call again. And then we head that way.

Okay. So there are three units then responding to this call.

A:

Correct.

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O: Okay. So again it's a 415 or 242 type of call and your understanding is the guy is shirtless, and where was he located at? The Rite Aid on Alhambra. **A**: O: Okay. At the time does he say that he's inside or outside the store? A: Outside in the parking lot. Okay. And now how do you guys respond? Are you responding Code-3, just normal? O: Just normal. A: Q: Just normal response. And about how much time does it take you to get there? A: About - about at least ten minutes. Could be more. And you say that when the call came in you were kind of parked next to Officer Villegas? O: **A**: Yes. Did you guys follow each other to the call? Q: A: Yes. He followed me. O: He followed you. Okay. So are you the first unit to mark 906 or the first unit on scene? Yes, but as we pull up on Alhambra I had missed a turn on - I didn't know where that parking lot **A**: entrance was... Q: Okay. A: ...so I had kept going north on Alhambra past the Rite Aid. Not knowing there was no parking lot entrance so I circled around and came back around. Q: Okay. So let's talk about that. So when you guys mark 9-0-6 which mean you're on scene, tell me what happens.

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A:	I press 9-0-6 and then I continue north on Alhambra and I see the Rite Aid on my right. I can't
figure out hov	w to get into the parking lot. I didn't see at that point where Villegas was, if he was still following
me or if he ha	nd turned yet. And so I had turned right on the street which is just north of Rite Aid - I don't know
the street nam	ne. And then at that point I had heard Villegas clip his microphone and then I didn't see him in my
rearview mirr	or. So I knew he was somewhere else and so then I went southbound on the street that is to the
east of Rite A	aid and then took a westbound turn along the street that's south of Rite Aid and that's where I saw
Villegas' car i	in the parking lot at Rite Aid on the south entrance.

Q: Okay. So are you then parked pretty much right behind Officer Villegas then? Yes. A: Okay. So that's going to be L Street. Does that sound about right? O: Yeah. A: Q: Okay. So then you exit the vehicle, what do you see? Before that as I see the guy and Villegas out of the car. I turn on my ICC. I rotate the camera. A: O: Okay. A: And then I put the ICC mic in here (referring to his front shirt pocket) and then I get out. And as I'm walking out I see Villegas contacting the guy. I want to say Hernandez at this point (referring to the subject that Villegas was contacting).

Q: Okay. I appreciate you clarifying that because that was going to be my next question. So you have your ICC, you point it over to where the individual is because you're still in your car, you look out and you see both Officer Villegas and the subject.

A: Right.

Q: Okay. What - what do you see at this point? Are they actually standing within close proximity of each other? What do you see at this point?

A: Villegas was kind of closing in on him from like ten feet away and getting closer. And as I'm getting out of the car I see him Hernandez go like this towards him (makes a motion with closed fist as to demonstrate Hernandez making a challenging gesture) and then - and that's when Villegas said to me, "He's squaring off on me."

Q: And he told you that when you exited the car?

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A:	Yeah.

Q: Okay. So with the Rite Aid business, you know I'm sorry I don't have a picture but, the subject Hernandez is just standing kind of in front of the business. Is he standing in the parking lot? Where exactly is he and where is Officer Villegas?

A: Okay. There's a parking - the parking lot is to the west of the Rite Aid building and we were at the south part along L Street.

Q: Okay. (I am provided with a copy of an overview map of the Rite Aid and Sutter Medical building located at 1201 Alhambra Boulevard).

And he was standing next to the furthest parked car in the parking lot along the south side. A:

Okay. And then at that point this is when Officer Villegas tells you he squares up on you. Q:

A: Right.

Q: And what action do you take at this point?

W- what? A:

O: Well you're saying that you're getting out of car, you're starting to approach to assist Officer Villegas.

Right. A:

Q: The subject had previously just squared up on Officer Villegas.

Right. A:

What do you do? Q:

I get close and kind of triangle in from where Villegas is to kind of make a triangle between the **A**: three of us.

Q: Okay.

A: And then Villegas is telling him to show his hands or something like that and then told him to get on the ground at one point and the guy kind of like walks away and backs up and at one point Villegas pulls out his Taser because the guy's not listening. And then at one point then Hernandez actually gets down on his knees for a moment and then pops right back up. And while I was also paying attention to Hernandez, that car that he

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was standing next to, the passenger door - the front passenger door was open and there was a male black adult sitting in that seat. And I could also see in the backseat there was a child in the back as well.

Q: Okay.

A: And I didn't know if they were involved with the guy whatsoever. And at some point either Hernandez or the male black said something that Hernandez was getting paid to throw at us trash or something like that.

Q: Okay. So then what happens.

A: After Villegas pulls out his Taser the guy...

Q: I'm sorry. I don't mean to cut you off but when you say he pulls out his Taser what does Officer Villegas actually do with that Taser? Does he point it at the subject? Is he saying anything?

A: He's telling him to get on the ground.

Q: While pointing the Taser?

A: While pointing the Taser at him.

Q: Okay.

A: And like I said at one point, I don't remember exactly at what point, he actually does get kind of like on his knees for a moment.

Q: Mm-hm.

A: Pops right back up while saying something similar to like, "I'm good." Or something. He wasn't making a lot of sense. And then pops up and goes to the front of the car, kind of after acting like he was going to get in the car but then he backs up and goes to the front of the car, in between the car and Rite Aid. And then it looks like he's going to start running northbound so I start going around because there was a tree in my way and thinking I'm going to be in a foot pursuit to run northbound. And then, I let Villegas do all the voice commands and so I don't remember exactly what he was saying, but all of a sudden Hernandez just turns around and starts running southbound across L Street towards the Sutter Building that we ended up into.

Q: Okay. So how - let's kind of talk about the subject we called or referred to as Hernandez. How would you describe him?

A: A male Hispanic adult appeared either late 20's, early 30's. Do you want height and weight approximate?

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Yeah.

A:

Q: Yeah. The best you can describe him. A: 5'6", 5'8" black air slim build - it's like average build actually. I remember tattoos on him but I don't remember where. And he was wearing a black hooded sweatshirt and I don't remember his lower body clothing. Q: Does that subject look familiar to you? (I showed Officer Dionne a single color booking photograph of Hernandez) It does. A: And who's that look like to you? O: Mr. Hernandez. A: Q: And would you say Mr. Hernandez where did that name come from? How did know it? A: Somebody pulled out his driver's license out his wallet and I saw the name on the driver's license. I want to say his first name was John but I'm not sure. So basically I'm just writing here on the picture that he identified him as John Hernandez. Q: A1: Thank you. Okay. (I showed the overview Google map of where the incident took place) So here's going to be O: the Rite Aid. Here's the parking lot, this is Alhambra, this is L Street, and this is going to be the Sutter Building... A: Okay. ...across the street. So when you first arrived you had said that Officer Villegas had turned in between the parking lot. Correct? I didn't see where he turned because he was behind me. A: Q: Okay. But when you had come back around? Right. Somewhere - somewhere like in here. A: Okay. That's what I meant. Q:

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Q:	Because you had parked behind Officer Villegas. So you're out here on L Street?
A:	Yes.
Q:	And somewhere in here with - just within the entrance area is Officer Villegas.
A :	Yeah. He was like super close.
Q:	Okay.
A :	Like where the first car was.
Q: Hernandez wa	Okay. Now it's kind of hard to see but it looks like with your saying that this - the subject as by the far south vehicle, is there like a buffer zone?
A:	It looked like there was actually a car parked right there, the white mark.
Q:	Okay.
A :	So that would be a similar area. Like Villegas was right here and the guy was right here.
Q:	Okay. And then you said you kind of triangulated and you were kind of off over here.
A :	Right. I was like over here, Villegas was here, and the guy was here.
Q: commands tha	Okay. So at that point when Officer Villegas had pulled out his Taser did he give any verbal at he if didn't comply that he was going to be Tasered?
A :	I don't recall that.
Q: second maybe	Okay. So at one point he - either he saw it or he saw your guys presence, he decided for a quick to comply?
A:	Yes.
Q:	Gets down to his knees and then decides, "I'm not going to go with the program."
A :	Right.
Q: vehicle?	Okay. So then at that point you said he gets up, and then appears to go toward the front of the

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	Tonow op Report # 3A 2
A:	Yes.
Q:	And then that's when he V-lines across the street?
A:	Right.
Q:	Toward the building.
A:	Kind of acting like he was going to run north and then doubled back.
Q: building.	Okay. So tell me what happens then. He runs across the street. He was running toward the
•	Yeah. He's running towards the building. That's when I got on the radio and what I forgot to tell the point where Villegas pulled out his Taser, I actually go on the radio and ask for the next unit use the guy wasn't cooperating.
Q:	Okay.
	Okay. So as he's running towards this building right here, which I didn't know the name of, I just some kind of hospital building. That's when Officer Hight's car started coming down eastbound on L 3. And Hernandez ran southbound right in front of his car and eventually ended up running into the
Q:	Okay. So as he's running into the building, what happens next?
the outside. For the elevate	I'm trying to catch up. But I didn't see how he got in there so fact because they're the activated r front doors but he got in there before us. And the doors hadn't actually closed and so watched from light catches up with me. Just waiting for the door open, like we see - I see him pressing the buttons or which was right inside and to the left. And eventually the doors opened and then Hight started a to get on the ground type commands. Once he started talking he had most of the verbal commands.
Q:	And the subject was still at the elevator doors?
A:	At first, yes.
Q:	Okay. So Officer Hight gave him commands to get on the ground.
A:	Right. I might have been yelling too but I don't remember what I said or if I did.
Q:	Okay. And what is Mr. Hernandez doing at this point?

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broadcast at or and catching u sounds and he was trying the then turned are	He turns and looks at us and turns around and just starts running southbound through the building. Eve chase I don't remember if I tried to get on the radio or not. I remember not being able to the point later on. But there was a couple turns in the hallways. I remember turning, following him ap and he would turn around and go, "Argh" like this while standing up like this making weird might have been saying some crazy things but I don't remember what he was saying. And then he doors as he was running through the hallways to try to find an unlocked door, I'm imagining. And bund on the second turn in the hallways and then he turned and did the same thing similar to go like taking weird sounds and growling.	
Q:	So was this like a complete square-up where he stops and?	
A:	Yeah.	
Q:	Okay.	
A: Like he's a little bit faster than us because the lack of gear and so he turned a corner real quick and soon as we turned the corner to catch up he's - seen him turn around and do that. And then after the second one that's when Hight fires his Taser. I didn't see at what point he pulled out the Taser. But he pulled out he fired the Taser once and that didn't do anything to him. He just kept running.		
Q:	So at this point when you guys were in the hallway it's just you and Officer Hight?	
A:	Yes.	
Q:	Okay. You guys are running pretty much side by side or is one in front of the other?	
A:	Pretty much side by side.	
-	Okay. And then like you said there are a couple "S" corners or whatever and where he squares up rner continues pulling on some doors. He goes around the second corner and you said that's when pulls out his Taser and deploys it?	
A:	I didn't see exactly where he pulled out his Taser, but yeah the second turn was where	
Q:	And it was after that second corner.	
A:	Yes.	
Q: to this individu	Pretty much. Okay. Do you recall if Officer Hight had given any announcements or said anything ual?	

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Follow Up Report # SA 2 A: I don't remember exact words other than commands like "Get on the ground." Type commands but I don't know the exact words. O: Okay. Now was that before or after? A: Both. Okay. So he then deployed the CED. What do you see happen at that point? Q: A: The guy just kept running. Did you see the darts hit him? Q: A: No. I couldn't tell at that point. Q: You couldn't tell? No. But it didn't - didn't appear to have any effect on him. A: Okay. Q: He didn't - he didn't slow down. A: Now at that point when the CED was deployed do you recall if he was squared up? Was he O: starting to take off again? A: He was starting to take off again. O: Okay. So it doesn't have an effect. He continues to take off and then what happens? And then he takes a left into or the point where we actually ended. He takes a left and I - as we **A**: turned the corner - as I'm turning the corner I see him pulling on the handle and Hight got, he's on the left of me, so he was closer so Hight just went and somehow how tackled him or got under the shoulder or something like that. And then that's when I came up right behind him and somehow we just all ended up on the ground. But either as we were falling or as we were still standing that I - that I had a grip on his left hand and wrist. Because I was trying to get that arm behind his back for control. So his left hand and wrist? Q: Yeah. It was the hand where he had some kind of metal watch on. A:

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Q: tackled?	How would you describe Mr. Hernandez's demeanor or inaction at that point? When he was
A: with both of n	Still very loud, very agitated very resistive, very strong I was just trying to get hold of his arm and my arms I couldn't budge his one left arm.
Q:	Now you said all three of you were on the ground at this point?
A:	Yeah.
Q:	Okay. So he was kind of describe what happened?
A: that leads to so like this.	He just kind of ended up with his head facing the door. There's a door right there. I don't know if tairs or whatnot. But he's kind of like on his side, his right hand was underneath him, just kind of
Q:	On his right side?
A:	Right.
Q:	All right.
A: was just trying	Correct. And then his left hand was like up here and that's what both of my hands were on. And I g to twist lock him and he wasn't budging for anything.
Q:	And where's Officer Hight?
furthest between	He was - I - I don't even remember. Just, because I think we kind of bounced around in locations. d on one side and ended up on another. But by the time Villegas caught up with us I was like the ten the door, like closest to the door of all the officers. And so Hight either ended up or started off me, like away from the door.
Q:	Okay. So on the right side is anybody facing him?
A:	On this side of him? No. There was a wall.
Q:	The wall's right there? So who's directly behind you?
A:	That had to been Hight then.
Q:	Okay. And then you're somewhere kind of behind him or on top of him?

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A: I think we were just kind of on top of each other somehow because we were all intertwined.

O: Okay. So at this time you - you're grabbing his wrist. You're trying to get him into a slide and you're using one hand or both hands?

A: Both.

Q: Okay. So then what is - tell me if you can, as best as you can, describe what actions being taken by Mr. Hernandez, Officer Hight, obviously you were trying to get him into a twist lock. You got both hands on his left wrist and hand. What do you remember at this point?

I remember Hernandez, he kept screaming and her telling him to stop fighting, stop resisting. A: Actually saying those words. I remember seeing Hight's Taser, like to my right for some reason, like it was being pointed at his back. I remember hearing several activations as the Taser was being pressed up against I guess his back or maybe his left backside. And I couldn't see what Hight was doing with his other hand. And it seemed pretty quick after that Villegas got there.

O: When you say you heard several activations, what's that mean?

The zapping sound, I don't know what else to call that. A:

Okay. If you had to guess, how many times do you think you heard it go off? Q:

In total? A:

Right. O:

A: I'd guess anywhere between five and ten.

Now during these activations are they like just back-to-back or are there pauses in between? Are O: there things that are being said to Mr. Hernandez, can you describe that for me.

A: Yeah. There were several. There was a pause in between every single one that I remember. Just numerous times telling him to stop fighting, stop resisting. And while he was still fighting he was saying, "Okay. I give up." He actually said that once or twice. But his body was doing the opposite of that. He was still, I don't know if he was trying to fight us or just get away because he didn't have the opportunity to take a swing with that free hand that he had.

Q: And when you say free hand are you referring to the left hand?

A: No. No, because he had a free right hand.

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A:

Yes.

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Follow Up Report # SA 2 Q: And that's where he's on that side? A: Right. Okay. And you're still maintaining control of the left hand. Q: I never let go of that left hand... **A**: Q: Okay. A: ...with both my hands. O: All right. So you say you hear then several activations from Officer Hight's CED and you said you think that they were directed into his back? A: Yes. O: Is that correct? Okay. Do you recall seeing that Taser being moved or deployed, contacted anywhere else on Mr. Hernandez? It's possible there's some higher and some lower and more on the left side. For some reason I A: remember that. But I couldn't tell you exact placements because I - I was - two things, trying to keep hold of that arm and trying not to get bit by him at the same time. Okay. So describe that then. What actions is he taking then that you think you might get bit? Q: A: My arm is from here to there and all that he had to do is lean forward. He wasn't trying to bite me... Okay. Q: A: ...but that was just a thought of mine. Sure. Okay and you're kind of still somewhat like what on your side on top of him? Maintaining O: that control? A: Yeah. Because I couldn't get him to move whatsoever. Okay. And then you said there was a couple pauses in between. That's when he's saying, "I give. I O: give."

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Q: other than just	And you're still maintaining control but you said that you're still not able to get anything to budge holding him still.
A:	Correct.
Q:	Okay. And from what I understand it sounds like he was still kind of actively resisting?
A:	Oh yeah.
Q:	Okay.
A:	It never let off.
Q:	What other acts - actions was he taking to resist your guys' authority?
A:	I couldn't see what he was doing with his lower body whatsoever.
Q:	Okay.
what the lower eventually han once he took c arm, because I kind of reacher after a lot of fi handcuff. The	But other than - I just couldn't move him whatsoever. I mean it was just weird. It's kind of like he of steel. I couldn't budge his arm. And there's - even when Villegas got there I don't - I don't know half of the body what was happening there. But not until more officers showed up that we actually dcuffed one hand. Villegas I think some- somehow handcuffed that hand I was holding. And then ontrol of that hand, that's when I kind of reached over his head and grabbed for that loose right wanted to keep away from his mouth. Just because he's acting so erratic. And then that is how I d, how do I describe this, kind of reached over him and pulled that second hand behind him - this is ghting now obviously resisting - and eventually got that second hand behind there next to the other we had trouble handcuffing him because of his sweater was in the way of the handcuff. And then few seconds to get that down. And then we finally handcuffed him.
Q:	Okay. So let's back up here a little bit because at some point you had deployed your Taser.
A:	No.
Q:	No? You never made contact or did anything like that with your Taser?
A:	No.
Q: Okay. So the whole time then Officer Hight has his Taser, he activates it you said more than like five to ten times, generally to my knowledge when you do a full activation sits for a full five seconds.	

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A:

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Follow Up Report # SA 2 A: Right. Q: Is that about right when you heard those activations? Were they going about that? I don't remember the full activations. It's kind of like I kind of remember hearing the sounds A: before and after during some of those. Like it wasn't the full time touching him. But I don't remember any of those having any effect on him - his actions. O: Okay. So then you said that that's when Officer Villegas at some point shows up and then you guys are still struggling. Did - when Officer Villegas showed up you said that at some point he grabbed or assisted in handcuffing that left arm that you had control of? Yes. A: Was the Taser activated affer that at any point once that handcuff was at least put on one wrist? Q: A: I believe so. Like maybe one or two... Q: Okay. A: ...of those times. And I remember I don't remember at which point that actually one of those times where he was Tasered that actually I got a shock from it. I don't know if it because the stun gun and watch. Because I c- I mean I wasn't paying attention to where the Taser and everyone else's hands were. Q: Right. A: I was concentrating on Q: Holding on for dear life. Yeah. And it took every ounce of strength I had to do that. A: Okay. So then at - after he was able to get the handcuff on that wrist... Q: A: Right. ...then that's when you were able then to reach over for that right hand and then it sounds like you Q: had railed and then move it behind him, and ultimately then get him handcuffed.

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After we struggled, yeah. It wasn't easy to do that.

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	ABQ 020122
Q: takes foreve	Follow Up Report # SA 2 Mm-hm. Okay so if you had to guess maybe and I know it's kind of hard cause it seems like it er
A:	Right.
Q:	how long do you think the struggle ensued?
A:	Are you talking about to he's handcuffed.
Q:	Yes. So when you and Officer Hight go and tackle him
A:	Okay.
Q:	to the point where he's able to be handcuffed.
A: was.	I'd have to guess probably three to five minutes. It felt longer than that but that's what I think it
Q: any other of	Okay. So at that point Officer Villegas comes in to assist you and Hight he's handcuffed. Are there ficers there with you at that time do you recall?
A:	No. And I don't know if you were going to ask me but Villegas was using his baton.
Q:	Okay.
•	I believe still collapsed on his upper body. And that's where he got hit because I don't know I know it's his upper body, not his head but in between like his shoulders and waist-type area. And I nber how many times I saw him take a hit, but like around five.
Q:	So let's kind of back up and
A:	Yeah, I'm sorry about that.
	No, no, no. I appreciate you interjecting that. So when Officer Villegas then arrives obviously he you're struggling to maintain control of his left hand and wrist. You got Officer Hight at some point somewhere activating the CED to try to get him to comply. You guys sound like you're all kind of thim.
A:	Yeah.
Q:	He's screaming at you guys.

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A: Yes. Q: And then Officer Villegas comes in. Do you recall if he tells him anything in particular? No. I don't. A: Okay. So then during that then, is that when he then uses his baton? Q: A: Yes. Q: Okay. And you said it's not extended. It's still in the collapsed... Yes. A: ...state. He then comes over where you're still kind of maintaining that control on the wrist and O: then he strikes him. You said you're not exactly sure but somewhere in between the waist and shoulder area? Yeah. But it might have been in his back too. A: Okay. And do you recall about how many times he hit him? Q: I want to say around five. A: Okay. And what is Mr. Hernandez doing at this point? Does he seem to be letting up at this point? Q: A: Not at all. He never let up until both the handcuffs on that's not until when he finally started somewhat calming down. O: So did it seem to you while you were maintaining control of that left hand wrist, when Officer Villegas comes over and does those blows, did he seem to then kind of loosen up a little bit where you were able then to grab control? Because at some point someone was able to get a handcuff on that wrist. Yeah. That might have been the part that helped because it's all kind of a blur... A: Q: Right. ...but, yeah it was after those strikes. Because I believe those were after and possibly during the A: CED deployments. But it was after those. The combinations is what finally got us - the getting somewhat under control, get that first handcuff on him.

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were too many people.

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•	Follow Up Report # SA 2
	Okay. So you just had a handcuff on, you still kind of continue your struggle. Once that one is there any other - you said Officer Hight might have deployed the Taser, the CED, once or two there anymore compliance rise of the baton from Officer Villegas at this point?
A:	Yeah. There might have been one or two.
Q:	One or two.
A:	Yeah.
Q: to the back and	Okay. And then in that point then that's when you railed in and manipulate his right hand and get in a land up handcuffing Mr. Hernandez.
A:	Correct.
Q:	Okay. So when he's ultimately then in handcuffed is he on his stomach, is he on his side?
A:	He's on his stomach.
Q:	Okay. And what actions is he taking at this time?
_	He's still, I mean I don't know what he was doing with his arms at that point because I heard e word "hobble" being said so I don't know if he was kicking or doing something with his legs. But I could see was on top of him that way and I had my right knee on his right shoulder. And used that om getting up.
Q:	And what is Officer Hight doing at this time?
A:	I have no idea.
Q:	So your right knee is on his right shoulder?
A:	Yes.
Q:	You think Officer Villegas is kind of like his legs down at this point?
A: Cunningham g	I have - you know at one point I heard Villegas say that his legs were stuck so I think I remember getting there and Piaz and the word "hobble" so I'm - I'm thinking that Villegas' leg got pinched in

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between Hernandez's legs while they were trying to do something with the legs because I heard him say, "My legs stuck in there." Or something like that. But I couldn't see what was going on with his feet and legs. There



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Follow Up Report # SA 2 Q: Okay. So did - did at some point he's kind of being controlled? Yes. A: And he is still actively resisting, yelling? Q: Yes. A: Q: He's being held down. Mm-hm. A: Is there any after force care that's being applied by any of the officers there? O: Yes, eventually someone came and just relieved me and so I want to say one of the trainees, A: Spring? Q: Okay. A: I think he took my spot because I think he could just tell I was exhausted. And someone's like, "Tap out. Get a breather. You're due." And so I don't know exactly what he did with my spotlights to the back. And as other officers at that point, Villegas and Hight were already out too. And so that's when other officers had taken control of him and but as I was getting up he was still resistive and yelling. Q: Okay. Is he still lying face down on the ground at this point still? Is he seat- seated at any point? A: Yeah. At one point eventually he was seated up that was after they took over - they took over, it was after we had hollered for someone to go ask for fire for CED deployment and what I forgot to tell you at one point was during the struggle that they yelled at one of the security guards to go help find the hospital to either direct other officers that where we were while it was just the three of us. 0: Okay. So when you guys are fighting with this guy what are you thinking at that time? You're on the ground with Mr. Hernandez? A: I'm thinking I hope I can outlast this guy with strength because I don't know what he was going to do once he got that left arm free but I couldn't get it to budge and I had the strongest grip I could on him. And I'm pulling back on him because I want to get that arm behind him because that would have made it easier just to hold him over. Q: Right.

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A: stop and tur	Follow Up Report #SA 2 So I didn't know what he was going to do. But when I saw his actions go like this and saw him and just do those crazy things I didn't know what he was thinking.
Q: display any	So when you guys were chasing him down the hall prior to that struggle did you ever deploy or firearm or less than lethal weapon?
A:	No.
Q:	No. Never took out your handgun?
A:	No.
Q:	Never took out your CED?
A:	No.
Q:	Never took out your baton?
A:	Nope.
Q:	Okay.
them was hi still had the	What - what is not funny, but at the end like my Taser actually wasn't in my holster anymore and e two Tasers on the ground and I was like, "Okay, one of those are mine." So Villegas said one of s and one of them was mine and neither one of them appeared to have been deployed because they - the things on the cartridges that hits. And so each one of us took one since we didn't know our serial d just put them in our belt.
Q: cartridge?	Okay. So when you carry your Taser or your CED on your duty belt you generally carry it with a
A:	Yes.
Q: missing from	Partly attached. Okay. And then like you said when you're done with the struggle a Taser is n your duty belt
A:	Yes.
Q:	and then you see a Taser, was it two Tasers on the ground?
A:	Two. I picked them both up.

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Follow	Un	Report #	SA	2.

Q: Okay. And they both had the cartridge attached. A: Yes. Q: Okay, if you can remember, kind of going back when Officer Hight deployed his Taser, do you remember -The first time? A: O: Yes. As he's going down the hallway... Mm-hm. A: ...so it's actually discharged you said you don't recall it having any effect on him. Q: A: It didn't have an effect on him. Okay. Do you know if he tried to reload at all? Or? Q: I have no idea. A: You have no idea. Q: A: Mm-mm. Okay. And then when you said that ultimately Officer Hernandez - or excuse me - subject O: Hernandez was handcuffed, whose handcuffs were used? A: I believe they were Villegas'. Okay. So he's the one that actually put the handcuff, the first handcuff on the wrist that you were O: holding... A: Yes. Q: ...onto. Okay. Do you remember who called for fire? No. I couldn't hear the radio. A: Then it wasn't you. Q: No. A:

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Follow Up Report # SA 2

Q: CED deploym	Okay. Do you remember that going out on the radio? That someone had called for fire because the tent?
A:	I had hollered for someone to say it on the radio.
Q:	Okay.
A: And I don't kn	And I don't know what they did if it was because of what I said or they just did it on their own.
Q: fire arrived on	Do you recall about how much time from when you had directed somebody to call for fire until scene?
A:	I'd say pretty quick. Like five minutes or so.
Q:	Okay. When they arrived on the scene what do you remember?
sitting above a	Like I said at this time I was just standing in the hallway, being out of the way just trying to catch ad as fire was walking in the west door that's when the officers that were caring for Hernandez were and sat him up against the wall. I don't know why they did it but that's what I saw it. And then that's we in and took over.
Q: Hernandez?	Okay. Did at any point from what you remember them having to do any medical treatment for Mr.
somebody - I	Yes. I don't know if it was our guys or fire but they had him on his back and they said, "We need off." And I'm like, "Okay. You need those off for medical reasons." "Yes." "Okay." And then don't know which officer, someone, they actually asked us to handcuff him in front but then the ed up completely off somehow. I don't know who took them off though.
Q:	Okay.
A: started doing (And then fire put those sticky things on him and then it seemed like almost immediately just CPR.
Q:	You remember what they were saying?
A:	No.
Q:	Did he stop breathing or did they say anything that why they were doing that?

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A:

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Follow Up Report # SA 2 A: No. I just kind of assumed it. Q: Okay. And what actions was Mr. Hernandez taking at this point? Was he still being resistive? Was he non-responsive or? By the time the cuffs were off? A: By the time the medics were asking for the cuffs to be removed. Q: A: He was un-responsive. Un-responsive. Okay. So did he go from like zero to nothing? Do you remember? Q: Yeah. A: Q: Yeah. Because like I said I was standing in the hallway. I didn't have the perfect view of him and the A: front of his body so - but it seemed like as fire was walking in that's when he stopped making sounds. So I actually remember saying or someone from fire saying he might be faking as he's still sitting up against the wall. And then after some assessment that's when they said that - that's when he got laid down on his back. O: Okay, so Officer Dionne's we need clarification from my understanding you're when in during the struggle with Mr. Hernandez you had said that you had pretty much only maintained control of his left hand and left wrist. From when you recall Officer Hight had deployed the CED and then during the struggle with the two of you and Mr. Hernandez on the ground, he had activated it the CED in a stun drive mode. A: Correct. O: At some additional point down the road, Officer Villegas arrives and he then uses the baton in a collapsed position, striking him multiple times. Yes. A: Q: About five, maybe seven times. A: Approximately. Do you recall if anybody else had deployed a CED? Q:

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I don't remember anyone else doing it, no.

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	REQUESTED
Q:	Follow Up Report #SA 2 Okay. Ah, do you recall anybody else using any type of force, whether it be hands on force, baton,
Taser or anyth	
A: not sure where	Ah, I think hands on; Cunningham and Paiz were on the lower body when they first got there. I'm e they ended up.
Q:	Okay.
A:	And then obviously, Springs since he took my spot. But I'm not sure what he did exactly.
Q:	And do you remember if the subject is handcuffed at this point? When they arrived?
A: handcuffed.	I think so, because, you know, it's the last of the officers were showing up, he was just getting
Q: my boss. All 1	Okay. All right, I'm going to take a quick break. I'm going to ask some follow up questions with right. And I'll be right back.
A1:	Sounds good.
Q:	Okay.
	Detective Ayers, Officer Dionne and Attorney Kevin Wiemer stepped out of the interview room for and later returned for follow-up questions.)
Q: you first got d	Okay, so one of the first things I wanted to kind a follow up with you, get clarification on is when lispatched to the call. You had said that initially Officer Villegas had "Code foured" you.
A:	Yeah.
Q:	You said you heard the nature of the call and then decided to put yourself back on it.
A:	Yeah.
Q:	What were you thinking at that point?
A: kind a manner call.	Because there had been three different callers on the call, I thought maybe it might end up in some r like this. Or some kind a violence or something like that, because it didn't seem very stable on the
Q: particular indi	All right, do you recall what the other calls; you said there were three additional calls on this ividual. The nature of those type of calls?

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A:

Yeah.

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Follow Up Report # SA 2

	I think they're all pretty similar, someone running in the parking lot and trying to start fights, rence is I do recall for sure is one of them said he was shirtless, one said he had just put on a dark the other one said he was wearing a black hoodie.	
Q: these other ca	Okay. So, you mentioned something here what are you thinking here, because obviously you hear lls, something is not of the normal nature.	
A:	Right.	
Q: going to go w	An individual acting rational, so you decide that hey, I'm going to put myself on this call and I'm ith these two other units.	
A:	Right.	
Q:	What are you thinking about this subject, prior to even getting there? You had kind a mentioned it.	
A:	I, yeah, it sounded like he obviously wasn't calming down and things were?	
Q:	So not having any interaction with this guy.	
A:	Right.	
Q:	What are you thinking, is he?	
A:	I'm thinking he's violent if he's trying to start fights with random people.	
Q:	And why would people act in a violent nature?	
A:	Either narcotic usage or mental problems.	
Q: either is a 515	Okay, so is that where your mindset is? You're hearing these calls, this guy's not acting rational, he 0 or he might be under the influence of a narcotic.	
A:	Yeah, that's based on my training, the experience of calls of this nature, yeah.	
Q: Okay, so then when you get there on scene, you finally get to the point where you're able to get behind Officer Villegas' vehicle, you're positioning your ICC camera, you're with the knowledge of putting your ICC mic in your pocket, you get out of the vehicle, Officer Villegas tells you that this guy just squared up on him.		

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Follow Up Report # SA 2

Q: code three res	You had mentioned I believe that at that point you had called for code three cover. Or did ask for ponse.
A:	Yes.
Q:	Is it because of what you saw or is it because of what Officer Villegas told you?
A:	Because of what I saw.
Q:	Okay. Describe that to me.
A: actions and rea	He just wouldn't listen to any instructions whatsoever. Was kind of, really deliberate with his ally fast acting and unpredictable.
Q:	Okay.
A: one of the two code three.	And I didn't know if he was going to want to fight or run. But, my thought was he was going to do and I didn't know how far away the third unit was. And so that's why I just asked for the next unit
Q:	Okay, so basically in your training experience, you've been in this job 18 years.
A:	Right.
Q:	You see this guy he's acting irrational, what are you thinking of this particular subject?
A: two.	I'm thinking he's either high on narcotics or he's got some mental issues, or a combination of the
Q:	Okay. Because of the behavior he's displaying?
A:	Yeah.
Q: individual dec	Okay, so then at that some point, that short interaction that you have there in front of Rite Aid, this ides to take off running across the street. Why do you decide to give chase?
A: prior calls that building.	Because I - I saw it was a hospital and assumed to be full of people and just based on the three are all on our call, that he's in a violent, behaving in a violent manner towards more people in that
Q:	Okay, so then as you give chase you obviously see him inside, because you're kind a stuck outside

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that door and he's trying to activate the elevator.

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A:	Right.
Q: hallway.	And then once you and Officer Hight enter into the Sutter Building he then takes off down the
A:	Yes.
Q:	Do at any time do you lose sight of him?
A:	Yes.
Q:	And how long do you lose sight of him?
A:	Just for a second or two.
Q:	And is that just because of the corner?
A:	Yes.
Q: employees in	Okay. So, what are you thinking as you're chasing? Are there any other subjects or individuals or the hallway?
A: remember I w	I remember by the elevator like there was a bench, like the elevators to the left as I'm walking in, I want to say one or two people sitting down or standing on the right hand side.
Q:	Okay.
A: was a hospital	I don't remember what they were doing or what their actions were, but I just assumed that since it type building it just would be full of people.
Q:	Okay. So, you lose sight of him briefly after that first corner?
A:	Right.
Q: you, what are	And from what I understand, from what I recall, you had told me, he kind a squares up, growls at you thinking at that point?
A:	Like he wants to fight.
Q:	Okay do you back off for a brief second?

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A:

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Follow Up Report # SA 2 A: No. Q: Or do you continue to charge after him? I just kind of stood well, huh, because of his hand actions, I - I kind a stop and look at his hands A: and make sure that he had nothing in them. And then by the time I start, restart running towards him he had he already turned around and starts running. Okay, so he has a closed fist, he's growling. Doesn't he really make any communication, just grunting noises, growling? A: Right. Okay, he turns off he continues running down the hallway, there's like another "L" corner, where O: you briefly lose sight of him again. Yes. A: Q: From what I understand, what you told me, that's kind of briefly when Officer Hight interacts with him with the CED deployment. Yes. A: Q: Okay. You hear that, you see the reaction from Mr. Hernandez and from what I remember you told me he does what? A: Something similar to the first time, like, just facing us, growl, making weird sounds, and I want to say he was still making his fist again. And this is after the CED deployment? Q: Before it. A: Q: Before it, okay. So, that's when Officer Hight deploys the CED? Yeah, and as, I almost want to say instantaneous as soon as I hear the pop from the CED is when A: he's he turns and starts running again. Q: Okay. So, obviously at that point it didn't take effect where it disabled him or.

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It would appear that it did no affect whatsoever.

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	Follow Un Depart #CA
Q:	Follow Up Report # SA Okay. What are you thinking at this point?
A: either to get i	I'm thinking that he's, because I saw him try to get in the doors I'm thinking he's trying to find nto an office, or I don't know where, what he's trying to do get away or hide or what.
Q: him, you're o	Okay. So and then that's a little bit later down the hallway where Officer Hight ends up tackling n top of him.
A:	Yes.
Q: minutes.	Okay. This is when you're in that struggle, you're in that struggle and when you said three to five
A:	Mm-hm.
Q:	You've been on the job for a long time. Have you been in physical confrontations before?
A:	Yes.
Q:	You've, can you guess about how many times?
A:	No, I can't even.
Q: does this one	Okay. Trying to think back to some of these other physical altercations you've had on the job, hor compare?
A:	It was my longest and most energy consuming one I've ever been in.
Q:	Okay, so three to five minutes is a long time.
A:	Yeah.
Q:	You're exhausted?
A:	Yes.
Q:	When that other officer comes to tap you out, are you able to like stand up or take a breath?
A:	Yeah.
Q:	Does it take you a minute to catch your breath?

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Follow Up Report # SA 2

A: coughing which	Yeah, I know I was coughing a lot as well. And up - up until like an hour or two ago, I was still ch wasn't happening before all this even happened.
Q: hearing the Cl	Okay. So, when you're in that struggle and you're holding on for dear life. You had talked about ED activations.
A:	Yes.
	You said that you kind a see on your, I don't know if the right side or something like that where has it in his back region. Can you tell if that CED is making contact, does it seem to have any aking it a louder grunt noise, does it seem to have any effect on each activation?
A:	Just verbally, physically nothing was different whatsoever. Just as strong, just as resistive.
Q:	Okay.
A: thing, but his	I like I said earlier I want to say one or two times he actually said, "I give or I give up." Type body was doing the opposite of that.
Q: said, because	So, when the CED would be activated, there's like you said there was like a break in time and you his physical action doesn't change.
A:	Right.
Q:	He's still struggling, he's still strong as an ox and you said that he voices, "I give - I give."
A:	Yes.
Q: saying anythin	And then at some point that activation from the CED is reengaged. Do you recall Officer Hight ng about his CED not working or doesn't seem to be having any effect?
A:	I don't remember if he said anything, but in my mind I didn't see it doing any help for us.
Q:	Okay.
A:	Because I was kind a hoping during the jolts I'd be able to gain control of him somehow.
Q: just a continuo better?	Right. Okay. So, from what you kind of remembered there was at least a break in time there wasn't ous activation of the CED where you were able to try to wrench him, gain control of that arm even

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A: time.	No, it seemed like Hight was trying to find a different place that would maybe work better each
Q:	Okay.
A:	It all seemed that I remember outside the clothing, so yeah, that's all I remember about that.
	So, what about this guy during this struggle while he's being zapped with the CED, what is his des of course just struggling physically, is he saying anything? Is he grunting, what's going through process at that point with this guy?
A: saying. But it v	Yeah, he was still grunting, screaming, he was saying some things, I have no idea what he was wasn't like that wasn't logical, didn't make sense.
Q: normal guy?	Okay. So, if you at that point during the struggle and it's a struggle are you thinking this is a
A:	No.
Q:	Are you thinking this guy might be under the influence?
A:	Yes.
Q:	You thinking this guy might be a 5150?
A:	Definite possibility.
Q:	Are you thinking this guy's just a regular drunk guy?
A:	No, I didn't smell any alcohol.
Q: symptoms that	Okay, so based on your training experience, then you're telling me by some of the signs and he was displaying that he was either under the influence and or might be a 5150?
A:	And or, yes.
going on. Wha	And or, okay. So, then at some point he gets under control and is handcuffed. You were able to the sers come in, you're able to kind a back off, catch your breath, kind a reassess of everything that's at are you thinking is going on with this guy at this point when he's being handcuffed or he's - he's dimedics finally arrive on scene and are treating him?

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A: medics get the	Follow Up Report # SA I'm thinking that he's still being just as resistive and they're just holding him in place until the ere.
Q:	Okay. So the medics arrive, he's still being resistive?
A:	Well, that I can hear.
Q:	That you can hear, you're not physically watching?
A:	Right.
Q:	Okay.
A:	I can't see past there's so many officers right there.
Q: handcuffs off.	Okay. And then at some point you said you heard one of the medics say we need to get the
A:	Yes.
Q:	What are you thinking at that point?
A: back and to do	I'm thinking something's going on, that either - I mean I, obviously they need to get him on his o whatever they do they need to get his back flat.
Q: you ever hear	Okay, is there anything that comes to mind why something like that would have to happen? Have the term excited delirium?
A:	Yes.
Q:	What does that mean to you?
	Ah, someone is on, high on narcotics and it's affected their system so high that their inner cores has no control, they lose control of their - their emotions, their - their body use and not be able to make them violent and at the end their body stops working, their body breaks down.
Q:	At any point did that cross your mind?
A:	Yeah, I actually verbalized it at one point.
Q:	You did? And at what point did you verbalize that?

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	Follow Up Report # SA
A: like in the mi	Once he was handcuffed and my knee was on, I purposely put my knee on his shoulder instead of addle of his back, I didn't put all my weight on his back.
Q:	Right.
A:	So, it was good just got a little air from trying to prevent some excited delirium.
Q:	Okay and you're telling that to Officer Hight and Officer Villegas?
A:	Officer Villegas were the two I remember.
Q:	Okay. And did they say anything back in regards to that, do you remember?
A:	I don't remember.
Q:	Okay. Have you ever seen this guy before?
A:	Not that I recall.
Q: drug user, or	So, from your knowledge you've never dealt with him before, you don't know if he is in fact a if he is in fact a mental subject, this is not some guy that you regularly dealt with?
A:	No.
Q:	You've never seen him before?
A:	Not that I recall.
Q:	Okay. Now talking about Officer Villegas and Officer Hight, have you worked with them before?
A: the last two y	Ah, Villegas for years and this is my first year working with Hight other than on overlap days for years.
Q: these two bef	Okay. Have you ever been in any physical altercation or a use of force situation with either one of force?
A:	Ah, with Villegas.
Q:	Okay and what was that situation?
A: years ago I f	It was a physical altercation where someone had taken a swing at our Sergeant. I want to say two hink it was Sergeant Freeman at the time

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Follow Up Report # SA 2

Q:	Okay.
A:	Now he's a Lieutenant.
Q:	And what was the end result of that?
A:	I want to say an arrest for either 148 or assault on a peace officer, one of the two.
Q: mental?	Okay, was there any extra issues with the subject at that time, was he under the influence, was he a
A:	I think he was intoxicated.
Q: been one of th	Intoxicated, okay. Kind a going back and looking at this whole situation, you said it had probably be longest struggles you've ever been in. What would you describe your stress level to be?
officers would	On a scale of one to ten, ten. A "10". I was giving it all I could, to maintain control just of that use that was the only thing within my grasp that I could totally control. Just trusting that the other I take control of whatever they were doing. Because he wasn't able to get up, so whatever we were eping him down at least.
Q: the Taser, the	Okay. And then one last question. With all of this tools that you wear on your tool belt, the gun, baton, you're all trained to use all those pieces of equipment, correct?
A:	Yes.
Q:	Okay and any reason why you didn't use any of those items?
A: just felt my be going to let go	No, I just had my, well the other two officers had their Tasers out at those other moments and I est opportunity for to get the control I thought I could get so, I just went with the hands and I wasn't o.
Q: officers had th	Okay. So just quick based on something you just mentioned right there, you said that the other two neir Tasers, what do you mean by that?
A:	Villegas had the Taser at the original scene and then Hight inside the hospital.
Q: inside during	Okay, I just wanted to make sure that Officer Villegas with your knowledge didn't have a Taser this struggle?
A:	Not that I know of.

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Follow Up Report # SA 2

Q: Okay. From what you're aware of he had the baton?

A: Yes.

Q: Okay. Okay. I think that's it.

A: All right.

Q: Do you have any questions?

A1: I do not. Do you have a car?

Q: Unfortunately, I don't.

A: You don't.

Q: Okay, you can use one of mine.

Thank you. A1:

Q: You're welcome. Can I do one last follow up make sure there's no other clarifications.

A1: All right.

Q: But, I think we're good. So if they need anything I'll let you know.

A: All right.

(Interview concluded and all parties exited the interview room at 2316 hours)

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Follow Up Report # SA 2

Related Attachment(s) - ATTACHMENTS

Attachment Description: **PHOTOS SHOWN DURING INTERVIEW** Reference Number:

3/6/2017

photo.mug (384×480)

SFD#17-6417B



HERNANDEZ, JOHN

* SHOWN TO OFC. DIONNE # 395

544763

1/1

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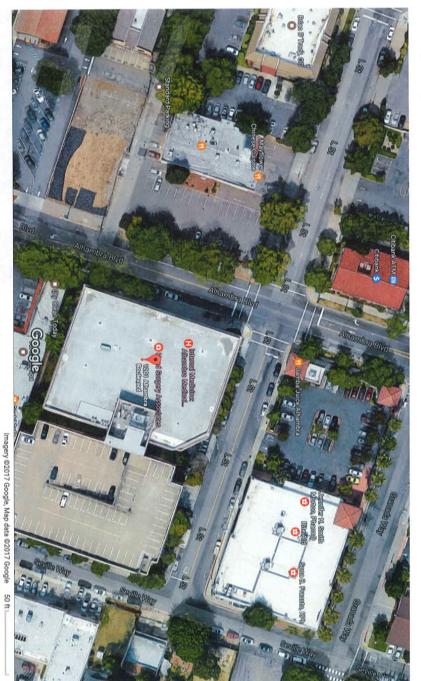
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Follow Up Report # SA 2

3/6/2017



Google Maps 1201 Alhambra Blvd

1201 Alhambra Blvd - Google Maps

aps/place/1201+Alhambra+Blvd,+Sacramento,+CA+95816(@38.5703769,-121.4660512, 139m/data=13m 11163/4m513m411s0x808ad0948773577d:0x34ede54b0ccb2b6118m213d38.5701665L

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Follow Up Report # SA 2

Narrative Text Report #3

Document: 01 VICTIM STATEMENT

Author: 3569 - MACAULAY, EDWARD 3072 Subject: (INVOLVE-OFR #1) VILLEGAS, I 8 Related date/time: Mar-06-2017 (Mon.) 2300

On Monday, 3-6-17, I, Detective Macaulay #272, interviewed Officer Villegas inside an interview room at the Sacramento Police Department headquarters, located at 5770 Freeport Boulevard. Officer Villegas' Attorney Zeb Daivs (Mastagni Holstedt Law Firm) was also present. The interview was audio and video recorded and later booked into evidence (PR# 949326-1). Prior to the interview Officer Villegas and his attorney viewed ICC footage. Refer to supplement for details.

The following transcript is not a word for word interpretation of the video recording. The transcription contains the relevant content of the interview. For exact detail please refer to the recording. The following interview took place:

INTERVIEW WITH OFC. VILLEGAS

Q=Det. Macaulay A=Ofc. Villegas A1=(Zeb Davis)

Q: Not a problem. So I'm Detective Macaulay with the police department here in the Homicide Unit. I'm here with Officer Villegas.

A: Correct.

Q: And your attorney.

A1: (Zeb Davis).

Q: (Zeb Davis).

A1: (Unintelligible).

Q: Okay. And how do you spell your full name?

A: Ismael Villegas, I-S-M-A-E-L. Villegas is V-I-L-L-E-G-A-S.

Q: And what's your badge number?

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	Follow Up Report # SA 2
A:	820.
Q:	Okay. And where are you currently assigned?
A:	I am assigned patrol to East Sacramento.
Q:	Okay. And the East District being?
A:	Sector Six.
Q:	Sector Six. Okay.
A:	Right.
Q:	And have you had any prior assignments to specialty units or training or anything like that?
A:	Prior, yeah. I worked the street gang enforcement team. But that was years ago.
Q:	Okay.
A:	Other than that, I've been primarily in patrol.
Q:	Okay. Do you have any other specialized training, like FTO, range master?
A:	No.
Q:	Use of force instructor or anything like that?
A:	No.
Q:	Okay. Have you worked for any other departments other than Sac PD?
A:	No.
Q:	No. Okay. And I'm sorry. I can't remember if I asked how long you've been a police officer.
A:	Fifteen years.
Q:	Fifteen years. Okay. Are you prior military?
A:	No.

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Q:

And what's in the baton holder?

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Follow Up Report # SA 2 Q: Okay. So today as we're sitting in the room here, you're dressed in full police uniform. A: Correct. Is that how you were dressed during the incident? Q: Yes, I was. **A**: Q: Okay. And you are wearing a full duty belt? Correct. A: Okay. So I want you to describe to me what's on your belt. So from - are you right-handed? O: A: I am right-handed. Q: Okay. So from the center line, going right around your belt. To my right hand? A: Mm-hm. O: A: I have my handcuffs my firearm. On my left-hand side I have my magazines. My hobble wrapped around that. My ICC mic. And I'm sorry. So we're starting back from the center line, around there. Q: Oh, yeah. I'm sorry. A: Q: No, it's okay. I'll go back. So from front right magazines and - I'm sorry. Handcuffs and firearm. And A: then starting from the center, going back to the left, I have my magazines, my hobble wrapped around them. I have my ICC mic. I have my key ring for my baton, my baton holder itself, and my radio. And then behind that I have my (CED) Taser. Q: Okay. You mentioned you had a baton ring and a baton holder? Correct. A:

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A:

Yes, it was.

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Follow Up Report # SA 2 A: My baton. Q: Your collapsible? A: Yeah, my collapsible. Okay. Q: I have the ring for riots so I can put a long baton if I needed to. A: Okay. Q: A: It's the only reason why I... Q: Okay. And were you carrying your straight baton today? A: No. I did not carry it. I don't carry it, actually. Q: Okay. Only unless - for whatever reasons. A: Q: Okay. And you said you had - your - your firearm is on your right side. Correct. A: Q: Is that a department-issued weapon? Correct. It is. A: And is it a - what kind of weapon is it? Q: It's a Sig Sauer P226. A: Q: Okay, 40 caliber? A: Correct. Okay. Was this your normal shift today? Q:

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Q:

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Follow Up Report # SA 2 Q: What - what is your normal shift? A: My normal shift is from 06 to 1600, so 6:00 am to 4:00 pm Sunday through Wednesday. And what team is that? Q: It is Team 33. A: Q: And who's your supervisor? A: Sergeant (Bob Quinn). (Bob Quinn). Okay. Great. And what's your unit identifier? Do you have a normal unit identifier? O: I do. It's one bravo seven eight. A: Q: And were you identified in one bravo seven eight today? A: Yes, I was. And that's a one officer car. Q: **A**: Correct. So you were - there - you didn't work with a partner today? Q: A: Correct. I was not (unintelligible). O: The - there was no other passenger in your car? No ride-along, no... No. **A**: Q: ...transportation? A: I was alone. Okay. Very good. And so normal shift, normal week. So I'm - and I - I apologize for not asking. What days off? A: Sorry, I have to think about it. Thursday, Friday, Saturday.

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Okay. So coming back to the - the call today.



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Follow Up Report # SA 2

A:	Correct.
Q:	Prior to that call
A:	Mm-hm.
Q:	Did anything happen during the day that was abnormal for a shift? Any
A:	Out of the ordinary? No.
Q:	Okay.
A:	No. Just regular calls for service.
Q:	Okay.
A: The only thing I had was - we had a major 911. But it - it turned out to be minor injuries, blooked - it was a potential where it looked like it was going to be so significant injuries, but it wasn't	
Q:	No other
A:	Nothing - no, nothing out of the ordinary.
Q:	No force incidents or anything like that?
A:	No use of force or anything.
Q:	Okay. So bringing it back to the call
A:	Correct.
Q:	that we're talking about. What kind of call was it?
A: in the parking	It was a call of a disturbance of a male Hispanic with a lot of tattoos who was challenging people lot, ready to fight.
Q:	Okay.
A:	Yeah.

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SA 2

	Follow Up Report # SA
Q:	And you were dispatched to this call?
	Actually, originally I was writing the traffic collision report. And I was sitting parked r (Dionne). We were out in his district. And they dispatched him and And Hight is my beat partner. So he told me, "Oh, I got dispatched to 415." So I pull up the car and I see that it's in my district. So I sent the dispatcher a message
that I was in re	oute to the call in my district.
Q:	Okay. And so (Casey) - or I'm sorry, Officer Dionne is with you?
A:	Correct. He's - he's in his own vehicle. We're parked next to each other as I'm writing my report.
Q:	Okay. And where - where are you guys writing the report?
A:	We were out in 6E, at that park off of I want to say it's Glenbrook Park, off of
Q:	Do you know the cross street, by chance?
A:	I know it's way east of Occidental.
Q:	Okay.
A:	It's the
Q:	It's further east of Occidental.
A:	Yes. Yeah.
Q:	Okay. So you responded
A:	Correct.
Q:	to the call.
	And originally, I had canceled to Officer Dionne. But he told me - because he had read the e call, that this guy was challenging the fight and that e he was out of it. So he put himself back on the call. So we continued. And we ended up following each other over there.
Q:	Okay. Were you - any code 3 emergency?
A:	No.

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Follow Up Report # SA 2

Q:	Lights and siren status. You were just
A:	No.
Q:	driving to call.
A:	Driving normal, hopped on the freeway and got off on - in - off of (Business 80).
Q:	Okay. Do you wear a body com did you have a body cam today?
A:	No. I don't wear a body but I do have an in-car camera and microphone.
Q: radio, other th	Okay. And were there any updates on the call as you were responding to it that came over via the an what you read on the call?
• •	I know that at one point, they said that the subject was now wearing a black sweatshirt. Because a sweatshirt wearing a sweatshirt. And then there was an update that d put a sweatshirt on.
Q:	Okay. And that came over the radio, or do you remember reading that?
A:	I remember refreshing the call, and seeing that in the text of the call.
Q: or Dionne pric	Okay. Was there any conversation over the MBT or over the radio between Officer Hight, yoursel or to getting
A:	No.
Q:	to the location?
A:	No.
Q:	Okay. Who arrived
A:	I did. And I
Q:	You arrived first?
A:	Correct.
Q:	Okay. And was Officer Dionne with you at that time?

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Follow Up Report # SA 2

A: that's directly	He was. We went opposite ways. I went down the actual - I believe it's L street, or it's the street south of the Rite Aid.
Q:	If I show you a map, would that help?
A:	Yeah, it would.
Q:	So we got a Google Earth map here.
A:	Correct.
Q:	So you can orient it however it's easiest for you to
A:	Okay.
Q:	to understand.
A:	Mm-hm.
Q:	So we got L street right here.
A:	Okay.
Q:	Alhambra boulevard.
A:	Mm-hm.
Q:	This is the Rite Aid right here.
A:	Okay.
Q:	And then this is the other building
A:	Okay.
Q:	across the street.
A:	Now this here is L?
Q:	This is L street.

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		Follow Up Report # SA 2
A:	Okay.	
Q:	And this is Alhambra.	
A:	So	
Q:	So this would be northbound.	
A:	Okay. So I went - I'm coming up northbound Alhambra.	
Q:	Mm-hm.	
A:	And I ended up making a right.	
Q:	Okay.	
A:	To go eastbound. And I ended up pulling into this parking stall.	
Q:	Do you want me to put an X right, kind of	
A:	Sure.	
Q:	Approximately where you parked.	
A:	One right there.	
Q:	I understand. This is a good - where it happened, it's	
A:	Correct.	
Q:	approximate. So we're	
A: I recall seeing	And Officer Dionne, he continued north. And then he ended up going through this SUV as I'm pulling into the parking lo	
Q:	So that's (unintelligible) this is Granada Way here.	
A:	Granada. Correct.	
Q:	Okay.	

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Follow Up Report # SA 2 A: And then I pull in, I got on the air and I advised Officer Dionne that I had the subject on this side of the parking lot. He came around and that's when he (unintelligible). Q: Okay. Did you activate your in-car camera at any point? I did. I did. As soon as I saw the subject right before I got out of my car, I - I did hit the ICC. A: Q: Okay. A: Mm-hm. And when you pulled up and you saw the subject, did you recognize him at all? Q: A: No. I - I mean, he matched the description. Mm-hm. Q: And then I - what caught my attention first was the sweatshirt that was hanging in the tree that was A: there. Q: Okay. A: And then I pulled into the parking lot. And I saw him. And he was sitting there and then stopped and then sat down (unintelligible). Okay. And - and you - had you had any prior contact with him that you know of? Q: No. No, not that I recall, no. A: Q: If showed you a picture of him, would you recognize him? A: Yes, I would. For today's incident. Correct. Does that person look familiar? Q: A: Yes. That is the gentleman that I dealt with today. Okay. All right. So basically, tell me what happened from the time that you pull up. You said he O: stood up, sat down. And I'll just let you... Okay. So I pull up - I active my ICC. I exit my patrol vehicle and I approach him. And I try to A:

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going on?" Um he's really not saying much. He's saying,

engage him in conversation, "Hey, what's

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Follow Up Report # SA 2

"About what?"	' And then as we're standing there, he kind of lunges at me. I'm	like
and I go (unint	telligible). And as I'm talking to him, I see Officer Dionne coming up and I'm like,	
"Hey, this dude	e's trying to square off." You know, because he -	
he hadn't done	that. And then at that point, he's like, "No, I'm not going to try and square off." And he kind of backs off. And I draw my Taser. So I put my Taser on hi	
at that point he	e's on one side of the - there was a silver vehicle that was parke	
first parking st	tall, as soon as you pull into the - into the Rite Aid parking lot. And he - it looks like he's	s trying
to	avoid me. So he kind of ducks and goes around to like the front of the car.	
kind of follow	him as I have him kind of at Taser point. And I'm	
looks like to m	ne is he's trying to avoid the red dot that I'm trying to put on him. And at one point, it loo	oks like
he	starts to run, or he starts to run I should say or jog a little bit in a northbound direction	
walkway that's	s in front of there. And I believe I pulled my Taser in a - in an a	
discharge it.		1
Q:	Okay.	
A:	It didn't discharge. And at that point	
A1:	I'm sorry. I'm going to stop you real quick. I said I wasn't going to, but where were yo	u standing
when you thou	ight you attempted to discharge the	
	I was just a little bit east of that silver car towards the walkway. I had a clear like maybed 12 feet away from him.	e anywhere
Q:	So you're between the car and	
A:	I would say	
Q:	The silver car and the Rite Aid?	
A:	Well, the silver car's to my right. I'd say there's the - the walkway in front of the Rite A	id and that
- that gentlema	an standing on the sidewalk there.	
Q:	Okay.	
running east do	He sees that and he now starts running south. And at one point it looked like he was go own L, but he didn't. He continued running. And I saw Officer I told him, "Hey, don't run after him." But I don't know if he heard me	_
Q:	And why - why'd you tell him not to run after him?	

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A: okay, othe	Follow Up Report # SA : Because I really didn't have - other than - I mean, what was my want at the time? I was thinking or than this guy running
Q:	Do you recall who was using their Taser?
	No. I - I know - I believe it was officer Hight because at one point while I was - while I - ck him, it was ineffective. So I know that I saw Officer Taser on his waistband. So I removed it from his waistband in an attempt to touch it on him. And that was ineffective, too. So
Q:	Okay. So Officer Hight and Officer Dionne are on top of
or Dionne	Correct. And they're just giving him commands, telling him hey, you know, "Stop resisting. ting." And at one point I don't know if it was Officer Hight, one of them said that the Taser is not working, it's not working. You know. And then the guy responded, "Yes, it is." But he didn't say - I mean, he didn't comply. He he said it like - it wasn't - it was almost jovial, like it wasn't like he was being out it.
Q:	Okay.
Hight mar I was relie	And at that point, I know that after striking him - at - at - at one point, I was able to get and and put my cuff on it. And I know I had that one cuff and Officer aged to get his right hand and we were able to cuff him, and he was still struggling. And while he was down the other officers arrived. And I was - I mean, I was exhausted. So then eved by another officer. I don't even know who came in and he and took my position. And I got up, stood up and just walked down the hallway so I could catch my breath.
Q:	Okay. So let - let me bring you back.
A:	Okay.
Q:	So you are Officer Hight and Officer Dionne are on top of the suspect.
A:	Correct.
Q:	Trying to
A:	Subdue him.
Q:	Retra- restrain him in some way.

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Follow Up Report # SA 2

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It was his right arm.

A:

A:	Restrain him.
Q:	And you approaching - you use your baton.
	That was after I tried to grab a hold of his hand. I know at some point, one of them Tased. That ing. So I realized, well, Taser's not working. So I transitioned to the baton. psed and I just used it in a striking motion.
Q:	Okay.
A:	And then
Q:	Where were you attempting to strike him?
A: with the left s	I did strike him along his - I would say like upper back, like left side and along the shoulder, along houlder. It was mostly left shoulder, mid-back.
Q:	Okay. And then he's, uh
A:	Face - face down.
Q:	Face down.
A:	He's - actually he's kind of like down to - like on the - sort of like a half fetal.
Q:	So like trying to roll, perhaps?
A:	Yeah.
Q:	Okay.
A: not give up. I	So - and this - I remember this - eventually I was able to cuff it. But this is the one that he would underneath.
Q:	You're motioning his - you - his right arm?
A:	Yeah. Correct.
Q:	Okay.

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Okay.

Q:

Follow Up Report # SA 2 So he was rolled up onto his... Q: A: Yes, he was rolled up onto his right arm. And he would not comply. He wouldn't bring his arm out. Okay. And you explained to me that you saw one of the officers Tasing the suspect. Q: A: Yes. Q: And at some point during that... Yeah. A: O: You hear, uh... A: I believe it was honestly I don't recall which one of them said it. But one of them said that it wasn't responded that it was, you know. working, and the suspected Q: And - and during this time, the suspect is still... Yeah, he's still not compliant. He's still fi- actively fighting. He's still struggling on the ground, A: refusing to give us his right hand. Q: Okay. And so you see Officer - so you've struck the - the suspect. A: Yes. I struck him with my closed baton. O: And are those strikes effective or anything to... Mm, they were not effective whatsoever. A: Okay. And you - you motioned that you did it with both hands? Q: A: Yeah. I grabbed the baton with both hands. And I recall like striking him down. Q: So is this before you were able to gain control of his right hand? Yes. This was way before I even placed the cuff. After I placed the cuff, I wasn't going to give it A: up.

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A: hand. And I w	That was - I had that hand cuffed. I had the cuff. I had the middle of the - the chain in between my give up what we already had.
Q:	Okay.
•	And that - but he was just so strong. And it just seemed like he was so strong, the - the suspect. trunning out of gas. I mean, I was getting exhausted w, struggling with this guy. But I - at one point he - I don't know if it was Officer Hight or Dionne, but - I believe it was Officer Hight, he was able to bring his arm behind him and to cuff him.
Q:	Okay. You said you reached down and grabbed Officer Dionne's
A:	Yes.
Q:	CED.
A:	Yes.
Q:	And it's - and was - and what portion - and what sequence of the events did that occur?
	I don't recall if it was like - it was at one point where the baton strikes were ineffective. So I when I saw his Taser. I said well, let me try this. And so I transitioned And I believe that's when I grabbed it and he's
Q:	Okay. And in - in what function did you use
A:	I was
Q:	the Taser?
A:	I was going to use it in a touch stim where, you know I remove the cartridge and - to touch him.
Q:	Okay. So presumably, that was before you had control of his left arm?
A:	Yes. This was before I had the left arm.
Q:	Okay.
A:	This - that happened before. Yeah.

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officers arrived because somehow, one of the officers ended up putting his legs in like a - like a leg

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lock. And my leg stuck in between his legs. And so when I'm wanting to get off of him, I couldn't. Q: Okay. A: So I yelled to get - get my leg off of him. So he - the - their leg - it was unre- that leg was unwrapped and I was able to get up. Q: Okay. And that's when you were able to walk down the hall. A: And that's when I was able to walk down the hall. O: Okay. And so you described a con- a point where you're just completely physically exhausted, correct? A: Yes. I was exhausted. Okay. And so you were down the hall when they had eventually got the suspect? Q: A: I know I was down the hall ca- catching my breath. There was other officers who were there. Uh I really didn't see any of that after force care or any of that stuff. I mean, I was like back and forth down the hallway, just trying to catch my breath. Q: Okay. A: Even like fa- unfastened my vest so I could get some more oxygen in me. And I for- I forgot to ask you. You are wearing a... Q: A: Correct. I am wearing a (unintelligible). Q: ...Kevlar vest. And you were wearing that... Correct. A: Q: ...during the time... Yes, sir. A: Okay. You said you didn't view anything after force care? Q:

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position was	Well, I was in the hallway and I saw - I didn't see exactly what they were doing, but I vere - other officers were attending to him because I was - where the actual at is kind of off the hallway. It's like a little walkway (unintelligible) like a small hahallway that leads to another door. Well, leads to a door, I should say. And it all happened, off the hallway. So I was off.
Q:	All right. Did you call for fire?
A: transmitting	I know I grabbed my radio at one point. And I know that when I was transmitting, I was when they were asking for locations. But I don't think any of it ut. I think it was bad radio reception.
Q:	Okay.
A:	But I didn't ask for fire.
Q:	Okay.
A:	I wasn't one of the officer that did.
Q:	Okay. So I want to take you all the way back to the beginning of the incident.
A:	Okay.
Q: commands?	Um scratch that. When you guys are - are fighting with him, are you giving him any verbal Are you
A: Give us you	Yes. We were telling him to give us his hand, to stop fighting, to stop resis- "Give us your hand." And he wouldn't. He just wouldn't.
Q:	Are you saying those commands? Or
A:	I know I did at one point. And then I know that I heard Hight and Dionne saying stuff to him. So.
Q:	Is he responding at any point?
A:	No, he's not. He's not complying with anything.
Q: working?	Is he get - any verbal - other than when you mentioned the Taser part where you're saying it isn't
۸٠	I don't recall I but I that's the (unintelligible)

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Q:	Okay.
A:	Yeah.
Q:	All right. So now I do want to take you all the way back.
A:	Okay.
Q:	When you're arriving on the scene.
A:	Okay.
Q:	You said when you first approached him.
A:	Mm-hm.
Q:	You
A: talking to him	I turned to engage him in, you know, conversation as far as what's going on with him. And as I'm he's like looking at me, looking up and down at me. And then
Q:	First, what did - what did you take that - that
A:	That he
Q:	I mean, you've been a police officer for 15 years. So what is that?
to a fight. And	Usually, when someone looks you up and down, they're sizing you to determine what they're you. And then that's - or, you know, to challenge you I you - what he ended up doing was he ends up kind of like lunging at me and making like a noise, you know, like to try to scare me or intimidate me. And then I questioned that's when Officer oaching and I told him, "Hey, this dude's trying to square up on us." You know, and then it from there. I drew my Taser.
Q:	So - so in your experience, what did you feel like this guy was
A:	Oh, that he wanted a fight.
Q:	Okay.

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A: Yeah. Q: And were his actions and... His demeanor, yes. It was as though he was going to get confrontational. And then my prior A: knowledge, knowing hey, he's - I think there was two or three different calls that were attached eventually that stated that he was being confrontational with a bunch of people. Q: Okay. And... A: (Unintelligible). ...had you seen those calls prior to your arrival? O: I was reading what was refreshed. And a lot of the times, they're pretty good about being able to A: it was just like two or three different people. And they were read most of the texts along there. But saying that he was being confrontational in the parking lot, cha-challenging people to a fight. Okay. **O**: Yeah. A: And so his actions - you eventually drew your Taser based on... Q: A: Correct, on what he did. And then his symptoms as far a- well, actually I should say his behavior as far as, you know, sizing me up and down and then doing that whole little lunge thing at me. So what - what was your intention at that point? Q: Well, at that - that was to intimidate him with my Taser to see if I could gain some compliance A: with the Taser. Q: And... Uh... A: With that complies, what - what was your intention? Q:

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	To detain him and then figure out what was going on with him as far as you know, if he was, you something or if he was suffering from some sort of mental condition. You e and figure out why he was doing what he was doing.
Q: possibilities th	Okay. And based on your experience, all those things that you just listed for me, are those at you were obviously going through?
A:	Yes. Those were all the possibilities.
Q:	Okay. Is there anything that I've forgotten to ask? Any pieces that
A:	Mm, not that I can think of now.
Q:	Okay. And your - at the end
A:	Yeah.
Q:	When suspect's in custody.
A:	Mm-hm.
Q:	And you're catching your breath.
A:	Mm-hm.
Q:	Kind of describe to me to the end, until he's gone.
requested it. I west handcuffed. H	I know that there were other officers that were rendering hi- well, giving him after force he fire department came in. I don't - I'm not sure who believe it was Officer (Borher). As far as coming in, I was away from him. I guess that's the exit. So I was east of him down the hallway. I know that fire came in at some point. He was e was asked by the fire department asked if they could indcuffs and place him in the front. And I know that was granted.
Q:	Were you there during that?
A:	I had overheard it.
Q:	Okay.
A:	I'm about, I would say maybe seven to eight feet away from him.

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Q:

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Okay.

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A:	Down the hallway, still ca- trying to catch my bre	eath. And I know that was granted. And
then at so	ome point, his handcuffs completely	came off. And then next
thing I kr	now they're giving him CPR. They start doing compres	sions. I know that they were - it looked like

they were trying to intubate him. They were putting different stuff down his throat through his mouth. And then the fire - they were just working on him there the

whole time. So...

O: Okay. And they eventually...

Yes. After - they actually were there for quite some time. I mean, it felt like forever. But they were **A**: there, giving him compre- CPR compressions.

Okay. After you used your - or attempted to use your CED... O:

A: Mm-hm.

Q: ...in front of the Rite Aid.

Mm-hm. A:

Q: Did you replace that into your, uh...

I (unintelligible). A:

Q: Okay. And so when you utilized Officer Dionne's Taser...

Mm-hm. A:

...while you were struggling with the suspect after you were done with the CED, what did you do O:

with it?

You know, I don't recall. I don't know if I, like handed it back to him. Or - I don't. A:

Q: Okay.

I don't. I know it got back to him. And I know at one point, we were handing people - we were **A**: ha- some were handing me a Taser. And then he's like, "I don't know if that one's mine or if that one's yours." And I had my serial number written on a note.

Q: Okay.

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A:	So I checked it. And I - it - it was my Taser. So I just reholstered it.
Q:	So your Taser was
A:	Given back to me.
Q:	And so how did your Taser get removed from your
A: recall that.	I don't recall how it was out. But at some point, I know that I grabbed Officer Dionne's Taser. I
Q:	Okay.
A:	Yeah.
Q:	All right. Well, let's take a break and then we'll, uh
A:	Okay.
Q:	come back. All right
Q:	All right. So I specif- specifically want to talk about when you first pulled up.
A:	Okay.
Q:	And made your first initial observations.
A:	Mm-hm.
Q:	Based on what you read on the call.
A:	Mm-hm.
Q:	And what you're hearing. So describe to me how he was acting.
was staring at	It seemed like he was on something like I want to say possibly a controlled substance or e meth or whatever. Just because of his fidgeting, his his movement, his - the way he me up and down, kind of real fast. Up and then the whole - you know, when he did a know. Anyone who's in their right mind usually is not going to do that. They're going to engage conversation or talk to you as far as what's going on. And he wasn't

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Q:	Okay. So based on your experience, this appeared like some sort of controlled substance that
A :	Yeah. It - it seemed like it to me, like he was possibly under the influence of something.
Q:	Okay. And you've come across, in the last 15 years
A :	Oh, yes, I have.
Q:	Okay.
A :	I - I've come across people who have been under the influence of a controlled substance.
Q:	Okay.
A :	And they behave in this manner.
Q:	Okay. And I want to move forward a little bit.
A :	Okay.
Q:	to when you grabbed Officer Dionne's CED.
A :	Mm-hm.
Q:	What made you choose his CED versus another weapon you had on your belt or your CED?
	It's what I saw. And, you know I looked - I keyed right on it. I saw it. I was - I know that my bator reholstered it and I went back - for some reason, I saw his. And I didn't nine. I just saw his. I said, that's a CED and I'm going to deploy it.
Q:	Okay.
A :	Yeah.
Q:	And you said you removed the Taser cartridge from him?
A :	I believe so. Yes, I did.
Q:	Okay. And so at this point when you had reached them, you'd already run across the street.
A:	Mm-hm.

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You had attempted to get his hands, which he wouldn't give you.
Correct.
You had used your baton.
Correct.
Okay. And how were you physically feeling at this point?
Exhausted.
Okay.
I was tired. But I knew we had not - we had not subdued him, so we couldn't stop.
Okay. And when - so you're exhausted and you get Tas- or Officer Dionne's, uh
Taser.
Taser. And you remove the cartridge. And you apply a first
A touch stun.
Okay.
And I believe it was in his back area.
Okay. And de- describe how the - how the touch stim worked.
I - I believe it was ineffective because I - we still had no comli- we weren't gaining any
Okay. Are you using a - are - is it - is he getting
I'm
full contact or is it coming off because he's fighting? Or describe that to me.
From what I recall, it - it may have not been a full contact. Because it - it didn't seem like it was e.

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Q:

...the trigger activation.

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Follow Up Report # SA 2 Okay. Q: A: So... Q: So... I wasn't - I was applying it, but I wasn't like driving it in. I was applying it and pulling the trigger A: in an attempt to try to get the - the activation of the Taser. Okay. And so first Tase - first direct stun. Q: A: Nothing. Nothing. Q: A: It seemed like all - all of them were nothing. Nothing was... Q: Okay. And so you're still - he's still struggling. Mm-hm. A: Q: And then... A: I know I released - I though okay, I see his hand. I need to cuff that hand. And I know I let go of the Taser. And I focused on the hand and I went straight for my cuffs. And that's where I went for the cuffs. Q: Okay. To put the - or for his wrist, I should say, to place the handcuffs on him. A: And how many times do you think you successfully deployed that Taser? Q: A: Uh... Q: And by successfully, I mean... Well, actually... A:

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Q:

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Follow Up Report # SA 2 A: ...touching him, I would say maybe two/three times. Q: Okay. Yeah. A: And what was the - was there a gap between each time? Q: A: Yeah. Yeah. In order for it to cycle, it needs to go through the full five seconds. Uh-huh. Q: I would think so. A: Okay. And so you pull the trigger. O: A: Mm-hm. Q: And you're Tasing him. Correct. A: It's ineffective. Q: Correct. A: Then what? Q: A: That's when I saw - I said - I saw the hand. And I said, I got to get that hand cuffed. At least, let's get that hand cuffed. Q: Okay. A: And that's when I reached for his hand and I got my cuffs and I - I struggled a little, but I was able to get one - the - one of them cuffed. And then I just held onto the... Okay. And what did you do with Officer Dionne's Taser when... Q: I believe I let it go. And it was - it probably fell on the ground behind us, or on the ground. A:

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Okay. Did that Taser cartridge that you had taken off the Taser, or the CED...

A:

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Follow Up Report # SA 2 A: That was also - I - I know at some point there was a Taser cartridge that was there that was given back to someone. Q: So you just - you took the Taser cartridge off and... A: I believe so. Q: And what did you do? Just... A: I just dropped it. Just discarded it. Q: A: Yeah. Q: Okay. And we talked about after force care. A: Mm-hm. And - and the fact that you were, you know, seven to eight feet away or... **O**: Mm-hm. A: Seven or eight feet you said down the hall. What - what did you see? What did you hear? O: Well... A: Either from the suspect or from the officers or... Q: A: I know that they were talking about sitting him up and making sure that the - he was getting oxygen. And I know at - at some point it seemed like they were ta- he was talking to them. But, I mean, there was so many people in the hallway by then, too. So there was a lot of people talking. O: Okay. So I don't know if it was... A: And why did you think it was him? O:

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Because of where it was coming from, the - the sound. It was like down below.

A:

Yeah.

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Q:	Okay.	
A:	Yeah.	
Q:	Was there - after the handcuff was on.	
A:	Mm-hm.	
Q:	Was there any additional use of force that you of	bserved?
	I believe he was Tased again by - by either Office - my focus was holding as another activation.	cer Dionne or Hight. I'm not sure which one of onto that. After - once I had that, I know at some
Q:	When he was - when you had the one handcuffe	d on him?
A:	When I had the one handcuff on him.	
Q:	Okay.	
A:	Yeah.	
Q:	All right. And did you see who did that?	
A:	No.	
Q:	Okay. It was	
A:	I was still focused on	
Q:	It was	
A:	(Unintelligible).	
Q:	Dionne or Hight, though?	
A:	Yeah. And there were - yeah. Because it was jus	at the three of us.
Q:	Three of you.	

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Okay. And that was when one handcuff was on him? Q: A: Yes. Q: Okay. When one handcuff was on him. A: Q: Okay. So you did not put the cartridge back into Officer Dionne's... I don't believe I did. A: O: Okay. Yeah. A: Q: Are you familiar with the signs of excited delirium? Yes. A: Okay. And in your opinion, did this individual exhibit those signs? O: A: Initially, no. Maybe just under the influence of something. Like - like I said, like a controlled substance. But usually when I've - I've come into contact with people who have. But usually it's initially from the - from the get-go. You know, they're sweating profusely. They're you know, fidgeting. (Unintelligible) grinding their teeth. Just showing outward symptoms that they're under the influence of something. And they're not responsive to anything. This guy actually, you know, kind of talked to me initially, you know, although he was not following my commands when I talked to him. But he didn't seem like he was at that point when I had my initial contact with him. Q: Okay. No. A: Q: He was - I don't think I asked you: What was he wearing? He was wearing a black sweatshirt. It looked like a sweatshirt. A: Mm. Q: A: And jeans.

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A:

Correct.

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Q:	Okay.
A:	And tennis shoes, I believe.
Q:	Okay.
A:	Yeah.
Q:	All right.
A1: was understan	You said that the suspect appeared to be on a controlled substance. But was it clear to you that he ding your commands?
A: telling him.	When I was talking to him it - it didn't seem like he - he was not complying with what I was
A1:	Yeah. But you could tell that he understood what you were saying.
A:	Yes. He understood what I was saying.
A1:	Okay. And were you injured at all (unintelligible)?
A:	Yes, I was.
A1:	Okay. What injuries did you sustain?
A: some - an abra	Some bruising some pain to the top of my left hand. I'm not sure exactly how I got that. And then asion to my right knee.
A1:	Okay. And has CSI taken photos of it?
A:	Yes.
A1:	Okay.
A:	CSI took photographs - a whole, complete overall (unintelligible).
A1:	So of your right knee, you said?

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Okay. Nothing on your face? Nothing... A1:

A: No.

Okay. A1:

No. A:

A1: All right. That's all the questions - that's all I have.

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Follow Up Report # SA 2

Narrative Text Report # 4

Document: **01 VICTIM STATEMENT** Author: **3448 - PUTMAN, DAVID 0870**

Subject: OFC SPRING #1006

Related date/time: Mar-09-2017 (Thu.) 851

On 3-6-17 at approx. 1700 hours I, Detective Putman #870 (IV127), was advised of a possible in custody death that occurred at 1201 Alhambra Blvd. I responded to the scene where I received a briefing about the events that lead up to the arrest of John Hernandez. I was then tasked with conducting involved Officer interviews at HOJ where there are interview room that are both audio and video recorded. I responded back to HOJ and at approx 2321 hours I interviewed Officer K. Spring #1006 regarding his involvement in the arrest and after force care of John Hernandez. Officer Spring was accompanied by his legal representative Kevin Wiemer. Officer Spring stated the following in summary.

I attended the Sacramento Police Dept. Academy and I have been in training as a Police Officer for about 3 months. Prior to my employment by the Sacramento Police Dept. I was in the National Guard for about 2 and 1/2 years. I have never been employed by any other law enforcement agencies in a sworn assignment. I am assigned to Patrol in the east area. Today I was dressed in a full Sacramento Police patrol uniform. My uniform today included a ballistic vest and a duty belt. Using my belt buckle as a center line working towards the right I have the following items; my ICC mic for recording, my flashlight, my handcuffs, my firearm, behind my firearm I keep a spare magazine, my OC spray, on the center of my back I have a glove pouch, on my back left I have my radio, then my taser, my baton, keys and then my spare magazines. I also use an ear-piece and I don't not have a backup weapon. My current shift is sector 6 dayshift with Thursday, Friday and Saturday off. My Sergeant is Sgt. Quinn. Today I was 1B64 in 6B. I am a trainee and Cpl. Piaz in my F.T.O. I was the passenger today in the patrol car.

We were at the south station when we heard a code 3 cover call broadcast. The first thing I remember about the call was the Officers calling for code 3 cover. We immediately responded for code 3 cover. As we drove code 3 I actively assisted my F.T.O. in clearing intersections and safely driving. As we drove to the scene they gave some location updates. I heard them say that they were headed into the hospital but then the concrete building stop radio further radio transmissions. It sounded like they were trying to transmit but it just failed, it was not readable and broken.

When we arrived there was a security guard and an Officer standing outside on the sidewalk directing people into the hospital. I believe the Officer was outside to give radio updates. Once we ran to the doorway I could see the Officers on the ground with the suspect. At first all I could see was the Officer's uniforms because they were in an alcove that shot off to the right of the building. Some of the Officers were half standing and some were completely on the ground. As I ran up the guy was yelling alright, alright, alright but he was still resisting. Officers were giving him commands but he was not complying. By the time I got there they were getting control of his hands and were getting the handcuffs on.

We entered in the west door of the hospital. From the door way to were the Officers were struggling with the suspect was about 50 feet. When I reached the group I stood behind Officer Dionne. I could tell that the Officers

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were physically exhausted so I took Officer Dionne's spot at the upper torso. At this point the suspect's left side was up against the wall so I was on his right side. At first I put my knee over his right shoulder blade with light pressure to make sure he wouldn't try to sit up or roll or try to buck up or anything like that. I was sitting on my heel with light pressure on his shoulder. I removed my knee from his back once he stopped resisting. Officer Piaz was holding his legs and basically it was only he and I that was holding the suspect. Once the suspect started to calm down I took my knee off of his shoulder blade and rested both of my knees on the ground and I continued to hold his arm in case he tried to roll or anything like that. The suspect started to calm down and he was still groaning and mumbling to himself. I could hear him breathing and then I gloved up and rested my hand on his back to feel his breathing. I could feel him back raise and fall.

Officer Piaz and I began to communicate. We were talking about excited delirium, which is when a suspect is already on drugs and then his heartrate goes up. We knew that that could be a potential outcome. We wanted to make sure he continued to breathe and that we monitored him. We knew that code 3 fire was on the way but we did not have an ETA so making sure he was breathing was our number one priority.

I do not have any extensive medical training besides what I learned in the Police academy. I did not call for fire and I do not know who did. I know that by the time we had him in cuffs I had heard someone say they called for fire. I do not know what time that was at. While we waited for fire he was laying there with his face towards the right away from the wall. His airway was clear from any obstructions. He was still amped up and breathing and it didn't sound like he was struggling to breathe. I continuously monitored the suspect until I was relieved by Sacramento Fire Dept. medical personnel.

I don't recall the specific questions that were asked but someone explained basically what had happened to Fire. Fire could tell that the suspect wasn't doing very well. We rolled him to his back and then moved his handcuffs to his front side at Fire's request. Then Fire asked us to remove the cuffs so that they could start CPR. When we took off the cuffs he wasn't resisting at all.

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Narrative Text Report # 5

Document: 02 WITNESS STATEMENT Author: 3172 - GRIGGS, JEFFREY 0670 Subject: (INVOLVE-OFR #6) PAIZ, D 2 Related date/time: Mar-06-2017 (Mon.) 2327

On 3-6-17 at about 2327 HRS I interviewed OFC Paiz #270 inside interview room #3 at SPD headquarters. OFC Paiz's SPOA representative, Zeb Davis (Mastagni Holstedt) was also present. The interview was video recorded and later booked into evidence under SPD PR# 947777-2. Prior to the interview OFC Paiz and Zeb Davis were allowed to watch the following ICC Video:

VEH 12077 (OFC PIAZ) from 14:39:17 to 14:41:00

The following transcript is not a word for word interpretation of the video recording. The transcription is of the relevant content of the interview. For exact detail please refer to the recording. The following interview took place:

DET GRIGGS: It's Monday, March 6, 2017. I'm Detective Griggs, G-R-I-G-G-S. Paiz, P-A-I-

Z, badge 270, and I forgot your name and probably how to spell it.

DAVIS: Zeb Davis, Mastagni Law Firm.

DET GRIGGS: All right. Can you spell your last name for me?

DAVIS: D-A-V-I-S.

DET GRIGGS: Thank you. How long have you been on?

OFC PAIZ: Over ten years.

DET GRIGGS: Ten years. What was your unit identifier today?

OFC PAIZ: Bravo 64.

DET GRIGGS: Did you have a partner or were you by yourself?

OFC PAIZ: A partner.

Who's your partner? DET GRIGGS:

OFC PAIZ: (Spring), (Kevin Spring).

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Follow Up Report # SA 2 **DET GRIGGS:** Is he a partner, trainee, or? **OFC PAIZ:** He's a trainee. **DET GRIGGS:** Trainee? Do you know what phase? OFC PAIZ: Phase 1. Okay. Like how long has he been? **DET GRIGGS: OFC PAIZ:** Like 50 some days I think. **DET GRIGGS:** Brand new, okay. Bravo 64, what's your days off? OFC PAIZ: Thursday, Friday, Saturday. **DET GRIGGS:** So you guys were 1 Bravo six 64 not 2 but 1 Bravo 64? Real quickly do you have any specialized training? Are you a range master, use of force instructor, something like that? OFC PAIZ: Well, a range master. **DET GRIGGS:** Okay, anything else? That you remember? OFC PAIZ: Sorry. It's late **DET GRIGGS:** Pepper-ball instructor or?. **OFC PAIZ:** Off the top of my head, no. **DET GRIGGS:** . This was your regular shift today? **OFC PAIZ:** Correct. **DET GRIGGS:** You started at 0600, correct? OFC PAIZ: Correct. **DET GRIGGS:** Okay. Prior to the call, we're going to talk about any crazy calls, use of forces, pursuit, stuff like that, okay?

OFC PAIZ: Okay.

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DET GRIGGS:

Mm-hm.

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DET GRIGGS:	Follow Up Report Was there any today?	# SA 2
OFC PAIZ:	No.	
DET GRIGGS:	Regular calls today?	
OFC PAIZ:	Correct.	
DET GRIGGS:	Nothing out of the	
OFC PAIZ:	No.	
DET GRIGGS: in your own wor	Okay. Then at some point you were called to the area of Alhambra and L Street, ds, why don't you just kind of tell me what happened in your own observations	, and
OFC PAIZ:	Mm-hm.	
DET GRIGGS:	just like you'd write on any other report.	
OFC PAIZ:	Okay.	
DET GRIGGS:	When did you first hear about the call and take it from there.	
going on. And th	Okay. We were over at JERPF just going through the car wash and then a about he's running one way. So then we started paying attention, trying to figure out what hen as we're at the gates getting ready to go we heard them yell for code 3 cover, which I this know, somebody doesn't call for cover very often, so it obviously could be very serious.	ıt's
DET GRIGGS:	Mm-hm.	
just kind of show assuming it was which way he's r northbound on A not that familiar see security flags broadcast on the	So we drove code from JERPF all the way to about that area you were and then while we were en route there was a lot of silence which is very abnormal obviously we that something is really going on and there's no updates. At some point I hear a female. I' Officer (Cunningham), but I don't know - a female talking about giving a brief description of running into a parking lot. And that's the only updates we had. So getting into the area, combalhambra I see another unit code in front of me, so I'm like okay, we're kind of in the area. I'm with exactly where they were, I just probably heard I think Rite Aid. As we're rolling up, we ging officers down, so we stopped on the west side of that building. And then we could see radio where we're at for other units, and then I went running in there with my partner. And down the hallway, I can see officers kind of in that corner over there	m of ing 'm e T-J

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OFC PAIZ:	apparently struggling with somebody. Keep going?
DET GRIGGS: anything or the officers say	Yeah, what did you - what did you hear at that point? Could you hear the person say anything?
OFC PAIZ: really words that were bein	I can hear from what I recall just kind of like yelling or - or screaming, not g said, just that somebody's there resisting and moaning, yelling, just that type of stuff.
DET GRIGGS:	What you're hearing is coming from the suspect or the officers?
OFC PAIZ:	From the suspect and then the officers struggling with somebody.
DET GRIGGS:	Okay.
	So as I ran up to where we're kind of like in a corner, and so I was seeing see the individual underneath. So right at that time somebody was having (Ishmael) and of on the left side of the individual.
DET GRIGGS:	Mm-hm.
(Cunningham) on to his left so I'm trying to hold onto h	So I kind of guided him back. And then as he's doing that, like I said, I don't of thandcuffed. They're just still fighting, so I kind of go over the pile, go over Officer it side. And then while doing that, I could see that he's actually handcuffed. And then is handcuff to control him, because he's fighting. And then he starts scratching me. So in I started communicating with Officer (Dion) who was up there on the - you know,
DET GRIGGS:	Mm-hm.
	So I got his left wrist in a twist lock or something. And then he's got the could stop flailing around. So doing that, and the guy is still screaming and yelling, stive. And then I'm kind of on his legs, as well. So they're trying to hold his legs so he
DET GRIGGS:	Is he - what position is he in when he's down there?
OFC PAIZ: kind of like bent up and jus	He's face down with his hands behind his back. And then his legs are just t crossed.
DET GRIGGS:	Okay.

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OFC PAIZ:	So not like in a weird angle but just if you were to bend your legs and cross
them so he can't spread them and kie	ek anybody.

DET GRIGGS: Okay.

OFC PAIZ: So I'm kind of halfway over his legs and then holding his hand.

DET GRIGGS: Okay.

OFC PAIZ: At some point somebody switches out his legs or whatever. I think (Alison) was there and then her partner ended up being there eventually and then looking at (Dion), just kind of assessing the situation. He said he was good originally. And then I kind of gaze around. I could see that my partner is standing there. There was another officer standing there. So I 'm like lets switch this out. And he's like okay. So he got up, and my partner got down and was dealing basically with the individual's upper torso. At this point he wasn't flailing as much. He was still flexing, but I'm trying to calm him down, if you will. So at that point, you know, having been extremely new obviously, so I was telling him okay, basically you got to watch out for these kinds of signs. So excited delirium?

DET GRIGGS: You're talking about your trainee?

OFC PAIZ: I'm talking to my trainee, right, so, you know, both his - and again I'm paying attention to this, because he's new. Both his knees are on the ground. He's not pushing on the guy's back or chest or anything like that. I'm not putting any pressure on his back or chest. I'm scared to have him move around or sit him up, because it was such an aggressive fight. These are three competent officers that obviously are still - amped up and he gave them this much of a fight, so kind of holding here, tell him that okay, watch him and make sure your job is to watch his breathing. Continue to watch his breathing. I'm going to control his lower part of his body. And we kind of stay on that way for some time. Then at some point everybody else was able to get up, and it was just me and him. And so for my portion, I kind of slid back to his legs, because he's not fighting as much, but he's just tense constantly. You can still hear him breathing. And again communicating with my partner. What exactly was said, I'm not sure, but those kinds of things, just strictly you're good, I'm good. Just making sure he's - he's not able to kick us and he's watching him. A couple minutes go by. So right about when Fire gets there is - so when they come in and assess what's going on. Kind of give them their quick briefing, just that little 10, 15 seconds, and then they're like, "Can we have him sit up?" I kind looked right and confirm and try and make sure we'll okay with this and we're all ready in case he just jumps up...

DET GRIGGS: Right.

OFC PAIZ:and just starts fighting again. So we're kind of all right. So we go to pull him up, and then we pull him up. You could tell that his breathing is starting to be like less. And so were like okay. So it's getting kind of serious. Like that's strange. So he's still breathing, and Fire is dealing with him, looking at him, and he's still handcuffed behind his back. So then Fire assesses him, 30 seconds, whatever, kind of looking at him, and then they end up pulling him down and laying him flat on his back, and his handcuffs

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are still behind him. So you can kind of tell they're kind of concerned with it. I'm concerned. By this point I'm looking at the guy going, okay seems pretty obvious he is not faking this, you know, and so - so I kind of yell out to whoever. Like what are your guys' thoughts on the cuffs? Can we take - we're now really obviously concerned. So I look at the Fire guy like, do you need them off? He's like, "How about we put them in the front?" I'm like, "Okay, we can do that." So me and my partner kind of lift him up again, support him, un-handcuff him, put his hands in the front and cuff him up and then set him back down gently. Fire is working on him some more, and then they start really going okay he's getting worse. His breathing is really labored, whatever, something along those lines is how I perceived it. So then they said, "We're going to start doing CPR." So either right before that or right after that they're like - I asked again. You know, "What do you need? Do you want them off?" They're like, "Yeah, we better fucking take them off." So we took the handcuffs off his wrists in the front. Then I gave those back to (Ishmael).

DET GRIGGS: Okay. **OFC PAIZ:** And then from then on, we're just kind of standing there, and obviously we're like okay, this is getting serious really fast. And so then we started kind of communicating, putting up tape and... **DET GRIGGS:** Okay. **OFC PAIZ:** ...like going from there at that point. I know Fire is hands on with him from there. **DET GRIGGS:** Okay. Let's back up a little bit. When you first arrive, you said (Ishmael). Did you pull him out or he was coming out or? OFC PAIZ: He was kind of coming out before tripping over each - or they were tripping over each other. So it was kind of like almost catching him, if you will, just kind of guiding him so he's good. And then again my thought was I had no idea if he would pop right back up. **DET GRIGGS:** Sure. **OFC PAIZ:** So I kind of dove over (Alison), if you will. **DET GRIGGS:** What was your observations of (Ishmael), Officer (Villegas) at that point? **OFC PAIZ:** Just extremely exhausted and winded. And again I couldn't tell if he was tripping, able to stand on his own, but like give him back. And so I was more focused on... **DET GRIGGS:** Okay.

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DET GRIGGS:

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...what was going on there. So I literally saw his back as he's coming back

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and just like okay, this is not over yet. We're still in the fight.

DET GRIGGS:	Okay.
OFC PAIZ: called for cover, and I'm he	And I'm thinking this is a long fight. I just drove from JERPF when they ere now taking over his spot, you know.
DET GRIGGS:	Okay. Do you remember seeing Officer (Hight) and what he was doing?
OFC PAIZ:	No.
DET GRIGGS:	Okay. And you mentioned briefly Officer (Dion) had the other side while you had
OFC PAIZ:	Correct.
DET GRIGGS:	the left side.
OFC PAIZ: so I'm kind of at the guy's l seconds or so.	It was kind of like right kitty-corner from you if the guy was right here. And ower left quadrant and right at the upper right. Okay. And he was there for about 30
DET GRIGGS: You don't realize that at fir	So your involvement basically, he's already handcuffed when you get there, correct? st or don't know, until you get in a better position where you can see.
OFC PAIZ:	Correct.
DET GRIGGS:	And then it's more just to kind of hold the guy for - to keep him from struggling?
OFC PAIZ:	Correct.
DET GRIGGS:	Okay. Did you use your Taser at all?
OFC PAIZ:	No.
DET GRIGGS: like that?	Any kind of pepper spray or any kind of use of force as far as force options, anything
OFC PAIZ:	No.

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Just holding the guy's wrists?

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OFC PAIZ: Yeah, just holding his wrist and his elbow so he can't scratch us.

DET GRIGGS: Do you know how you were holding his wrist as far as like - think about your

training and what you...

OFC PAIZ: Rear wrist lock, his elbow and his wrist, holding them in place. And it's his

left arm.

DET GRIGGS: Left arm, okay. And he's in handcuffs. Do you remember - fast forward a little bit to after force care. Do you remember - you said you and your trainee were in charge of keeping an eye on him or

you guys took over that...

OFC PAIZ: Yeah, we were there...

DET GRIGGS: ...teaching him.

OFC PAIZ: We were hands on with him at that point, yes.

DET GRIGGS: Okay, did you give him any kind of aid or was it just more of a monitor?

OFC PAIZ: It was more - yeah, more of a monitor, but kind of - yeah, more or less trying

to talk with him.

DET GRIGGS: All right.

OFC PAIZ: I am trying to communicate with him. I mean, I'm telling him, "Just keep

breathing. Just relax." I kind of calmed him. But yeah, nothing.

DET GRIGGS: Is he responding to you?

OFC PAIZ: No. I mean like he's breathing, but he hasn't been responding to any of us

this whole time.

DET GRIGGS: Okay.

OFC PAIZ: So like ideally I'd want to sit him up or roll him over but just fear of his

constant fighting and struggling. He's still tense. At this time to me it was the best option to keep us safe.

DET GRIGGS: Okay.

OFC PAIZ: And to keep him safe so this didn't continue. So monitoring his breathing, I

guess.

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DET GRIGGS:

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DET GRIGGS: Did you or your trainee place your hands somewhere on him to monitor his breathing or was that... OFC PAIZ: It was on his back. My trainee - my trainee was doing that. **DET GRIGGS:** Okay, and that was to - what was it, a pressure to hold him down or was it feeling his breathing. OFC PAIZ: Just watching his breathing, from what I was observing, and communicating with him. He wasn't trying to hop up at that point. **DET GRIGGS:** Okay. OFC PAIZ: But he's just tense, like just not... He's still in your perception struggling or is he just - what's he doing? **DET GRIGGS: OFC PAIZ:** I don't know what he's doing. Like he's not just like laying down like a wet noodle. He's tense. His legs are tense. His arms are tense, and I haven't seen this guy's face. I don't know if he's... **DET GRIGGS:** Right. OFC PAIZ: ...waiting just to start over again or what's going on. But in my mind I'm thinking, okay, he's finally calming down. This - he was in the long fight, as well. **DET GRIGGS:** Right. OFC PAIZ: So that's why I was immediately like well let's watch his breathing and all that but... **DET GRIGGS:** Okay. OFC PAIZ: ...assuming he's just kind of calming down, as well. So I'm trying to talk with him a little bit, but again, I'm not getting any like.... **DET GRIGGS:** Is he making any noises at all that you remember? OFC PAIZ: He's breathing out loud and just kind of making weird just noises.

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What do you mean?



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...not like words or anything like that. So at least I know he's getting oxygen.

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OFC PAIZ: of his mouth that's		Like grunt noises or just I don't know, just weird sounds that he's making out
DET GRIGGS:	Okay.	

DET GRIGGS: Right.

OFC PAIZ: So he's - he's breathing. His heart must be pumping. He's alive.

DET GRIGGS: Right.

OFC PAIZ: That's all good.

DET GRIGGS: As far as any care you would have to give him, he's - you're waiting for fire?

OFC PAIZ: I'm waiting for Fire. I'm waiting until we can figure out how we're going to do this safely without getting us hurt.

DET GRIGGS: Do you know who called for Fire?

OFC PAIZ: No.

DET GRIGGS: Okay. Did you call for Fire?

OFC PAIZ: No.

DET GRIGGS: Or your trainee call for Fire?

OFC PAIZ: I don't think he did. no.

DET GRIGGS: Not knowing who called for Fire, did you observe any reason for any symptoms he had that would make you call for Fire? Why was Fire called? I guess that's my asking - my question, but you didn't know who called Fire.

OFC PAIZ: I don't know who called, but I would assume just based on the whole fight, because there was some talk, and I don't know which part it was like we need Fire but not for us. We're all okay. Just for him, you know.

DET GRIGGS: Is that based on his symptoms or based on he was in a fight, use of force? Is that kind of standard or?

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I would - I'm trying to think. Like the use of force stuff I didn't even know

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was used, like the baton or the CED not until later.

around? Specifically, who do you remember?

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DET GRIGGS:	Right.
OFC PAIZ: then they're picking up Tas	While he's still in the big struggle, I did see like a prong at one point, and ers. So I'm like okay, this is going on, and obviously I don't know what's
DET GRIGGS:	Right.
OFC PAIZ: just assuming this is what with a definitive answer if	were there other issues? So I think just without really thinking about it, I'm we do. We call for Fire obviously always after force care, but not really like coming up that makes sense.
DET GRIGGS:	Right.
OFC PAIZ:	It's just you're on the fly thinking about it.
DET GRIGGS:	Right.
OFC PAIZ: And somebody was out the hollering back and forth.	And then - yeah, and we didn't have a good radio communication outside. west door constantly broadcasting stuff on the radio. And then we were kind of
DET GRIGGS:	Okay. Could you hear stuff coming over the radio or?
OFC PAIZ: stressed out, how we're dea	It was choppy at best and, you know, obviously the adrenaline is pumping, aling with that.
DET GRIGGS:	Did you try to make any transmissions; do you remember?
OFC PAIZ:	Only when I walked in the first door.
DET GRIGGS:	Initially?
OFC PAIZ: for other officers coming.	Initially. And that was like this is the building's - the words on the building
DET GRIGGS:	Okay. Do you remember as you and your trainee are with the suspect who else was

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stepped in, at son obviously messin	Follow Up Report #SA 2 I recall - excuse me - like I said, Officer (Dion) there, and I believe it was et. I don't know who else was standing right there. I just don't recall a face or whatever. Once I ne point Officers (Parker) - sorry - (Alison)'s partner stepped in, because I'm looking down there g with my feet a little bit, too, that I see the different face there. And then my trainee stepped in er than that I don't recall. I can think of - yeah, I don't recall.
DET GRIGGS:	You're focused on what you're doing now.
OFC PAIZ:	Yeah.
DET GRIGGS:	Okay.
OFC PAIZ:	Just kind of my area of responsibility, if you will.
DET GRIGGS: did somebody els	Okay. Did you give any information to the fire department as far as like a briefing or e do it? You know, like when they got what - you said there was an initial assessment and then?
OFC PAIZ:	I'm assuming I did.
DET GRIGGS:	Mm-hm.
OFC PAIZ: specifically what	Because I was with the guy and talking with him. But I don't remember was said.
DET GRIGGS:	Okay. Do you have anything?
DAVIS: notice if there are	Yeah, when you were on top of the suspect maintaining control of him, do you any weapons around that he might have been able to gain access to?
OFC PAIZ: realizing like oka	Yeah, like the CED, the Taser that was down. And that's when I was kind of y, there's still - there could be anything underneath him or around him and stuff like that.
DAVIS: them on the guys	Was there a fear that he could potentially get a hold of one of those and use?
OFC PAIZ:	Yes.
DAVIS: him until Fire arr	Okay, so you felt in your discretion it was a good idea to maintain control of ived?

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Yes.



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Follow Up Report # SA 2

Okay. That's the only questions I have. DAVIS:

That's it? **DET GRIGGS:**

END

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Q:

A:

Yeah.

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Follow Up Report # SA 2

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Document: 02 WITNESS STATEMENT

Author: 442 - HUNKAPILLER, TRAVIS A 3108

Subject: **DET INTERVIEW W**-

Related date/time: Mar-07-2017 (Tue.)

On 3/07/17 at approximately hrs, Detective Robison and I contacted W-	at Sutter Urgent Care. W-
is a security guard at the Urgent Care. I read to W-	his statement he had provided to patrol
officers and obtained a following up statement from him. The interview	was recorded via digital recorder (CD
later booked as evidence). The following is a summarized transcript of o	our conversation:

INTERVIEW WITH Q=Det. Hunkapiller

show you a co hours,	ouple things and then we'll be out of here. Okay? So it says on 03-06-17 at a which is 3 o'clock., I, Officer Perez contacted witness	ccurate. And I'll approximately 1500 which is
•	Alhambra. Witness stated the see if I could help escort a patient on	following. I was
Another	security guard and I helped escort the patient	
	The guy went to the Rite Aid and sat out front. I notice police went	to
the Rite Aid at towards the ho	and started to walk - started to talk to the guy. The next thing I know, I saw	
A:	That sounds more like " (statement).	
Q:	Okay.	
A: and that's whe floor garage.	It was about the same - yeah. I was on the second floor. I was - I stepped on I seen him approaching	out to smoke a cigarette g from - from the second
Q:	So let's go through when you say that the staff had called you to deal with	a patient on the
A:	Yeah. That was the first time and then he was on the fourth floor.	

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Let's go through that. So he's on the fourth floor?

Q:

Okay.

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Follow Up Report # SA 2 What was the call that you received? Q: A: He just told me to come and give him a hand and... Q: Who was that? A: Q: He told me to come and give him a hand. Once I got there, we took a minute to escort him out A: complaining about dogs chasing him. because he kept What was his demeanor when you went up to the fourth floor to... Q: A: First - when I first went up there, he said, "What's up? I'll take both of you guys." But he kept going back and forth. What did you take that to mean? Q: Nothing really. A: Like when - so if I said, "I'm - I can take both of you guys." That didn't mean anything? Q: But I can - you can - you can s- for some - I mean, if - I guess me for some reason you can see he A: didn't really mean it. You can see it was the drug that was talking. Q: So you thought he was on drugs? He was for sure on drugs. In the neighborhood I live in, like, you can - you can see these - you can A: see these things from a mile away. So what were some of the ways he was acting that give you the idea that he was on drugs? Q: Antsy. Yeah. Eyes - his eyes were very wide. Pupils were very dilated. He - yeah. He just ... A: Did he take a - did he take a fighting stance with you guys? Q: No. No. Not at all. A:

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Follow Up Report # SA 2

A:	Not at all.
Q:	Okay. Did he have his clothes off?
A:	His shirt was off.
Q:	He took his shirt off
Q:	Was his shirt already off when you got there?
A: but he just kep	Yeah. When I got there, his shirt was already off. We tried to get him to put it back on and leave it taking it back off.
Q:	Okay. Then what happened?
A: here because v	Then we got him out of - we got him - we got him out right here. Like I got him out the door right took the stairs.
Q:	So was there was there ever a point where the other staff members were afraid of him or were
A: walk through.	I mean, I'm guessing that's why they called. But I wasn't on the fourth floor. was doing his
Q:	Okay.
A:	That's how he got it - oh, he got the call actually.
Q:	Okay.
A:	And then - and then he called me after. So
Q:	So is it normal for him to have to call you to deal with somebody or is he
A:	No. This is the first time.
Q: right?	So it's a different situation when he has to call you to - for the two of you to deal with somebody,
A:	Mm-hm. Yeah.
Q:	Okay.

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Follow Up Report # SA 2 Yeah. It's more he - he probably feared him, I guess. A: Q: You - you thought he was afraid of him? A: Yeah. Okay. Were you afraid of him? Q: A: Nope. I don't know why. I don't know why. I mean, I don't know. Well, you probably - I mean, you probably have more experience than - I mean, you're - you're Q: doing - you're a security guard. That's your job is to deal with people. A: Mm-hm. And you probably have a lot of experience with dealing with people and... Q: I, you know, I don't get into fights but it's just the way I can talk to them and not get - just laid it A: out. Q: Okay. So - so you and - who's doing most of the talking between the two of you when you were dealing with this guy? It was me. A: It was you? Q: Mm-hm. A: And what are some of things you were saying to him? Q: "We don't want to have to call the police. I know you don't want the police called either. See - who A: wants the police called?" Right. Q: So he was like, "Yeah. I understand. I understand." And he started leaving. After A: that, he kept talking about the dogs and I was like, "There's no dogs. There's no dogs. You're okay. Let's - let's get on out of here and we can get you out safe." You know?

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Q:

A:

stairs, you know, the

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Okay. Q: A: And then after that, he got out and then went across the street to Rite Aid for... So you're on the fourth floor at this point? How does he get down to the first floor? Q: We took the stairs. A: O: So you walked... Because I didn't want to take him to the elevator and everything... A: Q: Okay. Why didn't you want to take him through the elevator? A: I mean, because we in - we - we're dealing with him. We can understand what's going on. Q: You didn't want him... Everybody else didn't - would not... A: Q: So you were worried that he was going to have... A: A problem... ...problem with other - yeah. Q: Yeah. Maybe scare somebody or something. A: Right. Q: Because he's - he's tatted and acting weird. That - that can put fear into some people's minds. A: So you walk him down the... O: Down the stairs. A:

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He - he wants to climb everything. He wanted to - he was climbing from the bottom- from the

bottom parts of the stairs.

...down the stairs and what - how does that go?

Q:

Okay.

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0	Follow Up Report # SA
Q:	Yeah.
A:	Hopping over everything. He's just playful. He was just playful. High and playful.
Q:	High - high and playful?
A:	Yeah.
Q:	Do you think he was really high?
A:	Very.
Q:	Very high?
A: lot of money ε	Very. Like, that's why I don't think he was a homeless guy. I think he was just - got - came into a spent a lot of money on drugs.
Q:	Got really high and couldn't deal with it?
A:	And couldn't deal with it. Whacked out.
Q:	All right. So you get him down to the first floor down through the stairwell and then what?
A:	And then we get him out of this door right here, on the side.
Q:	That door?
A: out on the seco	Yeah. And after that, that's the last we seen him. And then - until - until I come out - until I come ond floor to see ever- to see everybody across the street at Rite Aid.
Q:	And what's he doing over at the Rite Aid?
A: saying becaus was just havin	Talking to people. Shaking people's hands. Joking around. You know, I can't really hear what he's e I'm across the street but I can see, you know, he ag a playful time but I don't know.
Q:	Still acting high?
A:	Still acting high.

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Follow Up Report # SA 2

A: Still acting high.

Q: What - how are people reacting to him?

Some people who were probably in his same predicament are going along with him and some A: people were just walking away from him, moving away, you know, kind of fearful fearful.

O: Okay. And then what - then what do you see?

Then after that, I see one officer - I see two officers pull up. They try to detain him or talk to him A: and then he just instantly runs.

Q: Okay. When you say that they tried to detain him, how did they...

A: They were just coming to talk to them.

01: Did they go hands on at that point?

No. No. A:

Or did you see any - any altercation between them at that point? Q:

A: Besides them running and then they tried to Taser him to get him down.

About how long after they arrived on scene and like try to detain them? O:

It took about 20 seconds for them... For him to just bolt. A:

And which way - which was did he run? Q:

He ran - okay. If - if we're in - if I'm right there at Rite Aid, they pull up at Rite Aid. By where the A: jacket was, he books - he books around that tree is, where his corner to the - okay. You did have one.

Q: Yeah. I thought about it.

Thanks. Good eye. Q:

So real quick, is this - do you recognize... Q:

A: (Unintelligible).

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Follow Up Report # SA 2

Is that him? Q: A: If I'm not mistaken, yeah. It is him. Q: Okay. Is this a different picture from - of him? A: Q: This is his mug shot. A: From yesterday? Q: This is arr- no, this is an arrest.. one of his booking photos ... A: Okay, yeah Okay. So you recognize him as that? Q: Mm-hm. A: Okay. So here on the map, here's the - here's the Rite Aid. Here's the... Q: A: All right. First officer pulled up right here. That's where his car was probably all night. It was right here. Q: Okay. A: He was right here. He just hit the corner right here... So I'm going to have a circle where the officer's car was and I'm going to make a - a triangle where O: you saw... Okay. And they were right here. A: Q: Okay. They came up to each other right here. A: Q: Okay.

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Mm-hm.

A:

Follow Up Report # SA 2 A: And then as soon as he - as soon as the officer started walking toward him, he ran around the car, came in and went through here to our office. Q: So he ran this way? A: Mm-hm. And then he ran through the front doors? Q: A: Yup. Q: And you say there were two officers here initially? Mm-hm. A: Q: Okay. Could you just - do you remember what those officers look like by chance? A: One had a very high, I would high top haircut. I remember him from yesterday, too. White, black, Hispanic, Asian? Q: White. He... A: White. Q: A: It - it was gray. Q: Okay. But... A: Do you remember what the other officer looked like? Q: No, I don't. A: Q: Okay. I don't remember distinctly - distinctively. A: All right. So he runs into the entrance... Q:

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Follow Up Report # SA 2

Q:	and both - both officers pursued after him?
A:	Yeah.
Q:	Or - okay. And then, what do - what did you see from there?
A:	After that, they
Q:	So you mentioned they - they attempted to Tase him. When did that occur?
A:	Yeah. That - that occurred as soon as he hit - as soon as he got to this car, he hit the car.
Q:	So you know this is - this - this isn't accurate. So this is a Google map. So these cars
A:	Yeah, no. Well, yeah, of course, but there was a car parked there.
Q:	There - there was a car there?
A:	There was a car parked there.
Q:	Okay. So as he runs, the officer's running behind him?
A:	Mm-hm.
Q:	And then about how far away is him when he tries to Tase him?
A:	He was about from right here to right here. He was behind the car and he was behind
Q:	How many feet do you think that was?
A:	Like 12 - I don't know.
Q: Taser deploy?	So let me ask you this, Did you see him with his Taser out or did you actually see the
A:	Oh, I seen it deploy.
Q:	You saw it deploy?
Q:	The wire?

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Follow	υp	Keport	.#	SA	2

A: Yeah.

Q1: Okay. All right.

A: And he missed.

O: Okay. And when - when you saw that deployed, did it have any effect on him? I think you said he

missed?

Yeah. It missed him. A:

Q: Okay. So then he r- keeps - continues running?

Mm-hm. A:

Q: And then they ran after him?

A: Yeah. They ran after him.

Both officers? Q1:

And they caught him in that corner right there and then... A:

Okay. What'd you see from there? Did you see anything then? Q:

A: A very, very hard struggle. He was not giving up. He didn't - he was just resisting arrest mainly.

Q: So what's a hard struggle mean to you? Was he - was he active?

He was active. He was not going down without a fight. For - for sure. A:

Okay. Q:

I would - they still tried to Tase him while he was away - was on - to calm him down I guess. A:

Q: Do you remember which officer tried to Tase him or...

There was so many on him. A:

Okay. Q:

A: So many on him.

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Follow Up Report # SA 2

Q:	How many officers were there at that point in time?
A: seven, eight, n	It started off at about - at about three officers and then at - we let the rest in, four or five, six, ine, ten.
Q:	Ten.
A:	And then
Q:	Okay.
A:	(Unintelligible).
Q:	And then how many times do you think they tried to Tase him?
A: then I also ren baton or - or a	The whole time that - while they were on them. So that was like about five minute struggle. And number one officer blatantly just jabbing at him with - with his - either flashlight.
Q:	Okay.
Q:	Baton? What did it look like?
A:	It was short. So I think it was a flashlight.
Q:	Okay. Because we have the collapsible batons.
A:	Oh, okay. Well then it was probably that.
Q:	Was it black, metal?
A:	Mm-hm.
Q:	Okay.
Q:	How many baton strikes did you see?
A:	About - at least five.
Q:	Did any of those have any effect on him?

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Q1:

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A:	Not at all.	# SA 2
Q:	Did you hear any commands or any - during this time or they telling him to stop?	
A:	Yeah. Yeah.	
Q:	Okay.	
A:	Stop, sir. Put your hands behind your back and on your knees.	
Q:	Okay.	
A:	The basics then. He just did it all	
Q:	Was it all - he wasn't cooperating with our commands?	
A:	Mm-mm.	
Q:	Okay.	
A:	He probably ran for no reason really.	
Q: handcuffs or w	So you think this went on for about five minutes before they were able to what, get him into what did you see at that point?	
A: their offices or	After that, I just wanted to get everybody that was trying to come out of their offices and back down there at that hall, you know, to keep the area safe.	k into
Q:	Okay.	
A: watch. I was	And then I held the door open for the rest of the officers to come in. I couldn't watch. I couldn't	ı't
Q1	Understood. Would you describe the struggle that officers had with him as violent?	
A:	On whose part?	
Q1:	On the suspect's part?	
A:	Yeah.	

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Do you think the officers acted inappropriately or did anything that was...

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Follow Up Report # SA 2

A: I mean... Q: ...excessive? A: ...you don't get - you don't - you resist arrest, you get what you get honestly. Okay. Well, what does that mean? I mean, do you think they used excessive force or do you think Q: for what they were dealing with? it was appropriate A: For what they were dealing with, it was very appropriate. What the heck is that (bug crawling on arm)? Q: I don't know. But get it out of here. A: It is bleeding (unintelligible) for some reason. All right. You thought it was appropriate force? O: Mm-hm. A: Q: Now do you recall the suspect losing consciousness or anything like that? Did you see any of that? A: Like I said, I couldn't watch the rest. So I - I just helped everybody to keep it safe. O: Okay. Did you see the medical staff using - working on him or anything like that? Did you see any officers assisting him medically? A: Well, when they pulled him out, I did see the - the breather (unintelligible). I've seen that on... Okay. Q: And was that after fire had arrived or was that before? Q: A: That was when he was on the stretcher already. Okay. On the stretcher. Okay. I got to ask. Did you take any video of this with your phone at any O: that? time or anything like Like I said, I couldn't watch it. A:

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Follow Up Report # SA 2

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Q: of this inciden	Okay. Do you know if anybody was standing around you, using their cameras or taking any video to?
A:	No.
Q:	Did you see any of that?
A:	No.
Q:	Okay.
Q: that you think	Is there anything else that you remember that we haven't talked about that stands out in your mind important or I should know?
A:	No.
Q:	Okay. Cool.
A:	Like I said, he - he - he probably shouldn't have even ran.
Q: whatever their	Well, you know, when people are under the influence and they're high and they're, you know, mindset is, they do whatever they do.
A:	Okay. That's exactly why I stay away from drugs.
Q:	Exactly. All right, buddy. Well, thanks. I appreciate it.
A:	Do you need anything else?
Q:	No. No. We're good.
A:	(Unintelligible).
Q:	I won't - I promise I won't call you in the morning anymore.
A:	Because you heard my voice when I said, "Hello."
Q:	You're like, "Hello." I'm like, "Oh."
A:	My phone's right by my head. Just like, "Oh my God."
Q:	All right,

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Follow Up Report # SA 2

A: See you later. All right.

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Follow Up Report # SA 2

N	arrat	tive [<u> Fext</u>	Re	port	t #	7

Document: 02 WITNESS STATEMENT

Author: 442 - HUNKAPILLER, TRAVIS A 3108

Subject: **DET INTERVIEW W**-

Related date/time: Mar-07-2017 (Tue.)

On 3/07/17 at approximately 1444 hours, I Detective Hunkapiller #710 met with Wheadquarters. W- is an employee at Sutter Health and had witnessed the incident. I interviewed in Interview Room #6 (audio / video recorded). The following is a summarized transcription of our conversation: (for a verbatim statement see recording)

> INTERVIEW WITH Q=Det. Travis Hunkapiller

Q:	All right.	So I'm just g	omg to go over t	the statement you	gave to the officer	with you, Mr.
----	------------	---------------	------------------	-------------------	---------------------	---------------

Sure. A:

And then you go over it and make sure it's correct and accurate. Q:

Okay. A:

So Officer Harrison spoke to you yesterday. He said that you stated to him, "I was inside the recovery room on the first floor when I heard a very loud noise from the walls coming from the hallway. I walked outside of the recovery room and walked west down that hallway. As soon as I walked around the corner I observed officers fighting with an individual on the ground in the middle of the hallway. I saw and heard a big Hispanic officer tell the guy they were fighting 'If you don't stop I'll fuck you up."

A: Mm-hm.

Q: "And not see who that the - that they were fight - I didn't see who they were fighting on the ground. I heard the Taser - I heard the Taser go off about three times."

Mm-hm. A:

"And then witnessed a big Hispanic officer hit the guy on his legs and thighs with his baton about six times. The guy they were fighting was extremely resistant. It appeared as though he had the strength of a giant."

Mm-hm. A:

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Follow Up Report # SA 2

Q:	"The officers had a really hard time trying to subdue him."
A:	Mm-hm.
Q:	Is that pretty accurate what I read?
A:	Yeah.
Q:	Okay. So let's just go through it from what you remember. So you actually work at the - the
A:	I work in the surgery center. Yeah.
Q:	Okay. And what do you remember hearing as far as the loud noises?
A:	Well myself and another nurse who is (she didn't want to go outside.
Q:	Okay.
-	We were standing and we were there talking and we just heard loud noises kind of rumbling bunded like somebody was fighting. And she's like, "Did you hear this?" I said, "Yeah I did." So we do to the exit door from our recovery room which is the door that we take patients out of when we m.
Q:	Okay.
A:	Heard the noise to the left so the hall kind of zigzags.
Q:	Mm-hm.
covered coil t know, like I s	So I talked around the hall. And it had kind of little - a little alcove. There's a door that leads to d it's right in front of the men and women's locker room. So as I approach I saw the little copper hat comes from a Taser. The coil is on the ground. There were three officers on top of him. You aid then I heard that the Taser go off. It was just kind of a shock because I haven't really seen that before. But I did hear the officer. He was kind of heavyset Hispanic looking guy.
Q:	Okay.
A: nere but it wa	And I didn't - I don't know what his name was but he had a small little like those clothes against a smaller one.
Q:	Mm-hm.

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Follow Up Report # SA 2

~ ~	And he was, you know, yelling at the guy, hitting him with the - he said, "If you don't calm down ack you up (And they just continued to try to - to res- to - to put the - one of them at one is handcuffs he couldn't get them on but they were struggling. They needed help.
Q:	So describe that to me. So what were the - the - the - the suspect?
A:	Suspect.
Q:	Can you describe him? Do you remember what he looked like?
A:	I do not - I did not see his face. I couldn't really see his body because they were hovered over him
Q:	So what were some of his actions?
A: get them to lea	He was screaming, yelling, he you know profanity. He - he just was giving it all he had to try to ave him alone and let him go.
Q:	So
A:	He was very (solemn). The three of them go
Q:	Was he fighting with them? Was it a violent confrontation?
A:	It was a violent confrontation.
Q:	Okay.
A: much as far as	And so they - but because of them the three of them were on him and he couldn't really do that hitting them or kicking them.
Q:	Okay.
A:	But he was giving it all he had to - to - to fight with them for sure.
Q:	Could you hear the officers giving him any commands to stop or to
A:	Yeah.
Q:	What - and what were some of those you heard?
A:	Relax, stop, you know.

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	Follow Up Report # SA 2
Q:	Okay.
A:	To - they were just basically trying to talk to him first but they - they
Q:	Did he ever comply with anything they instructed him to do?
A:	No.
Q:	At - at no point?
A:	No.
Q:	He never
-	I got after a few minutes they - they looked like they were struggling and needed some help. He backup so I turned around and I walked down the hall to the door leading to our building and I saw ederal officers and I just kind of waved to them to come.
Q:	Mm-hm.
A: thought you k	They went through. I saw a couple more. Directed them to come through and then at that point I know I'm just going to leave it in the hands of
Q:	Okay.
A:	of the professionals, let them deal with it and I went back to my work - my work area.
Q:	So you said you heard a Taser.
A:	I did. I
Q:	What did - what was that sound to you?
A:	Pow, pow, pow, pow, pow, pow.
Q:	Okay. And how - did you remember how
A: that sound co times that I he	I heard it. I heard it. It - it sounded like when they were - when they were tasing him to have made nsistently and it stopped and then I heard it again and it stopped. There was a good three or four eard it.

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Q:

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Follow Up Report # SA 2 Q: Okay. Me and my coworker (she's also got the phone call. I don't know if you called or not. A: Yeah. Q: You did? A: Q: Yeah I talked to (Oh she and I talked this morning. We both heard - heard it about the same time. She was in the A: hallway with me when we both were watching what was going on. So did you - could you tell those - those individual Taser, could you tell if that was having any Q: effect on the - on the subject? A: It didn't seem to at all. No. Q: All right. It didn't seem to phase him at all because after - after I heard the first Taser go off he was still A: moving around. Right. Q: So by the third time yeah they were still fighting when at that point is when I turned around to go A: to direct the other officers inside. Q: Do you recall what the officer that what the Taser would even look like by chance? He was the one I think that was in the middle of them but he was a Caucasian ma-male officer. A: Okay. Q: A: There were two Caucasians from like I could see and then the kind of heavyset Hispanic guy. So then you described to me one of the officers using his baton. Q: Yes. A:

Did you remember how many times he did strike - struck this other guy?



before he even came...

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Follow Up Report # SA 2 A: It - it was roughly half a dozen. That he... Q: And he looked like - that he looked like he was getting it all the guy. A: Okay. So could you - could you see if those were having any effect on - on the suspect? Q: A: No. Q: Okay. A: No. The guy was like you know I mean in - in my experience working in healthcare I've never seen it but I've heard you know people say they would - or colleagues, coworkers say there are people around on real strong substances, drugs. They're on Crystal meth or whatever and it just gives you you know kind of power beyond what's normal for an average per- average person. Super human? Q: Super human type - type deal but the guy was definitely - I was kind of shocked because I would **A**: think that if somebody got hit with a Taser once that they would kind of put him out. Q: Yeah. But some reason it didn't really seem to have that much effect on them. Whether or not they were A: tasing actually tasing him I mean they might have been trying to. I mean I don't know how the things work. I mean they hit with the sh- they shoot it at the guy is it going to hit your body? Q: Well do you remember what kind of clothing he was wearing? He was wearing a shirt and pants. A: Do you remember what the shirt was? Was it a big shirt, heavy shirt or... Q: A: It looked like - no. It looked like it's like a regular average shirt. I remember it being kind of like red, white. Okay. Q: A: said that he had a black shirt on at one point. She actually saw him across the street

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A:

Q:

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Follow Up Report # SA 2 Q: Right. ...into our building so she probably - and she says she remembers what he looked like so she A: probably was looking. Q: Yeah. A: And got more - a lot more information than I could at that. No. He - he wasn't wearing like a jacket or a sweatshirt or anything. He looked like he was relatively in thin clothing and he had jeans on. Q: Okay. A: He had pants on. So how long have you been in the medical field? Q: A: Fifteen years. Q: Okay. When you see people acting like this what's your - what's your assessment of it? Either mental illness or drugs. A: Q: Okay. And she said and (said that when he was outside he was you know trying to fight people A: and just wasn't acting right and that's just not... Did you buy some... Q: A: I've seen... And that's what (told you? Q: Yeah. Yeah. Yeah. She - she - she saw lot more than I did. But the only reason why I even walked A: outside in the beginning was because I heard you know like starting with a fight. A commotion? Q:

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that worked on the other side of the office buildings or one of move coworkers was in harm's way.

Right. Understood. Did you see the security officer inside?

A commotion. I just wanted to make sure that for one the security guard was there and that nobody

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Follow Up Report # SA 2

A:	I did.
Q:	Okay.
A:	But he looked like he was a little scared but like that he didn't really know what to do.
Q:	Okay.
A:	He's a - he's a Russian guy.
Q:	Mm-hm.
A:	He was actually there when I left. He works the - the evening shift at our surgery center.
Q:	Yeah. We spoke to him as well.
A:	But he just looked a little frantic.
Q: started to obse in - in cuffs?	Okay. In your estimation, Mr. how long do you think that it took for the - the time you rve this confrontation with the suspect and the officers to the time they actually got him handcuffed
A:	I didn't - I didn't see - I didn't see him get handcuffed.
Q:	Okay. Good.
A:	So
Q:	How long - how long did you observe this - this struggle?
A:	Five - five minutes.
Q:	Five minutes?
A:	Maybe six minutes. It wasn't very long.
Q: handcuffed?	And during that five minutes that you observed the struggle at any time did the officers have him
A:	Absolutely not.

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Follow Up Report # SA 2

Q:	Okay.
A: pulled his han	They tried - they pulled the - out their handcuffs to the guy that you know with the baton. He dcuffs out but he couldn't - they couldn't get them on him at all.
Q:	Okay.
A:	They were having a really difficult time. Really difficult time getting that guy
Q:	Okay.
A:	trying - trying to retain him. It was - it was a struggle for them. I felt bad.
Q1:	Right.
A: could resist th	But at the same time like I said I just never seen anybody with you know it was that strong that ree - three officers.
Q:	Right.
A: to	And I would - I would assume that they've got certainly levels of training that they would be able
Q: inappropriate	Well let me ask you this. Did you see anything - any actions of the officers that you thought were or excessive?
A: until against it fuck you up."	The only thing - the only thing that - that I mean I don't know what the level of acceptance is a. I mean this stuff wasn't police brutality but I mean for him to say, "If you don't stop it I'm going to
Q:	Right.
A:	I was like well you don't need to say that.
Q:	Right.
A:	But you just to have do at your best at your job
Q:	Right.

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surprised that they weren't able to get him under control.

Right.

Q:

	Follow Up Report # SA 2
A: to me I think	to retain someone but and I - if I were in his mental state of mind and I heard an officer say that his natural reaction would be to want to fight back even more. I mean is that
Q:	So other than verbally did you see him - his actions were excessive or did you see
A:	He swung pretty hard with that baton.
Q:	Okay. But was it in your opinion was it having any effect on the individual?
A:	No.
Q: naven't discu	Okay. All right. Anything else that stands out in your mind that you think is important or we assed? Have you ever seen this person before?
A:	No.
Q:	No? And like I said I think you said you didn't see his face?
A:	No I did not see his face.
Q:	Okay.
	We see homeless transient people all the time. Some of them will be talking to themselves or you one call me a tall skinny nigger one time when I was walking across the street from the Rite Aid that's a we see homeless people all the time.
Q:	Right.
A:	But nothing like what we saw yesterday.
Q:	Yeah.
A: that guy peed	It's never happened. We've had to kick people out of the lobby that are sleeping in you know for d on the wall but nothing where they're causing - actually causing physical harm or people trying to.
Q:	Right.
A:	I think that I - I probably was a little bit surprised thinking he was a strong guy. I think I was little

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Follow Up Report # SA 2 A: In - in a - in a decent timeframe but you know I've never seen anything like that in person before. Q: Yeah. The guy was just - the guy was - the guy was out there. A: He was - he was going for it, huh? Q: A: Yeah. Q: Okay. All right. A: I'm just glad that they got him out of there but apparently he's in the hospital now. Yeah. Yeah. And... Q: A: I read a couple of reports on - online today and one of them hinted that he was there as a result of the - the - the tasing. I don't know how true that is or not but... Q: Well that's part of our investigation. That's why it's important that we get everyone - everybody's statement and everybody they observed what you know and get - and get everybody's what they saw, what the what the actions of officers were. That's why I asked. A: Are they not supposed to do that level of tasing? No, no, no. I mean that's all part of the investigation. Q: Okay. A: Q: But it's important that we get all that information. Sure. A: To determine if - if you know if their actions were appropriate. Q: A: Appropriate. Yeah. And - and if you know obviously if our actions resulted in his condition or if he was having a O:

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condition prior to our contact. That's all part of the investigation so.

A:

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And I - I - it - just because of my level of experience and not seeing anything like that before I

wouldn't think that you would have to Tase somebody three times. The fact that the - that the it was a little - like

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Follow Up Report # SA 2

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that might be	a little overkill. And then of course I didn't like the language the officer is using with
Q:	Understood.
A:	And
Q:	You have to take in effect the adrenaline. We're all human.
A: you're drunk a	Oh yeah. Absolutely and we're all - all I can imagine thousands of cops in the position when and the case yeah for sure you want to - it's - it just takes you to another place.
Q:	Yeah. Yeah. I mean we're human.
A:	Sure.
Q: and - and you	And of course like you said they're trained and we're all you know we're trained to do the job and know I - I apologize that you had to hear that language.
A:	Yeah.
Q:	And it's
A:	People say it all the time.
you know son	But - but again adrenaline kicks in and when you're in - in what you describe as this guy is going cers are actively fighting with these guys and sometimes - sometimes people and you probably if ne of these people have (unintelligible). They don't respond to please and sir. Sometimes you have ing to get their attention. And sometimes profanity gets somebody's attention.
A:	Okay.
Q:	And that's - and if they respond to that then - then
A:	You have to - you have to use your certain means to
Q: you know plea	You have to use certain means because not everybody has the same you know on to a response to ase stop.
A:	Right.

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Follow Up Report # SA 2 Q: That you have to say, "Fucking stop." A: Right. And that may get their attention go, "Oh okay. I need to stop." Q: Got you. **A**: Q: So that makes sense to you? That makes sense. A: O: Okay. And then like you said you know if the Taser is not working runs it and tries again you know you try a couple times and so that's why you probably transition to another tool so he went from the Taser it's not work - the Taser is not working. I got another tool in my tool belt I'll try that. And then you try that and that doesn't work then you move on to something else. A: Okay. **O**: So you don't stick with one thing and it's not working where that would probably be excessive so if that clears up for you. A: Sure. So but I again getting your statement is important to our investigation. I want to make sure that I **O**: have all the information. A: I was thinking about it afterwards. I was like, "Gosh I should have my - pull cell phone out." I didn't think - think (you). Yeah. Well let me ask you that. Who - did you see anybody that you knew did? Q: No. A: O: Okay. A: No. Then you yourself did not? Q: A: No.

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Okay.

A:

	Follow Up Report # SA 2
Q:	Okay.
A:	Oh if I would have - it would - it would have been right here. I would have showed
Q:	Well I appreciate that. So
A: that be	If - if in the future that it does I come across anything like that should I? If I have my phone would
do so but if - if	Well if you see - if you see something that you think it needs to be recorded you know certainly - if an officer comes to you and asks you, hey, did you record that? And that's nice if you would that video so we can see that.
A:	Okay.
Q:	So yeah I mean you know we're at an age now where everybody is videoing everybody.
A:	Sure. Absolutely.
so it sounds lik	You know it's a little bit different when we grew up. You know that stuff wasn't available to us the you used good judgment and you're a good witness so you - you heard something, you went out hed it and now you're providing the details for me so in my opinion
A:	Okay.
Q:	you did - you did
A:	It - it sounds to me like you're going to give me a part more a little bit more information of
Q:	Yeah.
A:	add a little more tidbit to start the (unintelligible).
Q:	Yeah. Everybody has a little part that they add to the puzzle.
A:	Mm-hm.
Q: investigation	And we give one a - a complete picture and it's just you know it's - it's like I said it's all part of the

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Follow	Up	Rei	port	#	SA	1
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Q:	to make sure that - that we did our job and that you know we continue to do a good job when
we're faced w	vith these situations again so.

A: Okay.

No more questions I have for now. Q:

A: If I can - if you have any more questions or do you mind I'll give you a way to my number so feel

free to call.

Q: I really appreciate you coming down so.

Oh. A:

Q: And I - and I apologize for the inconvenience and...

No it's not an inconvenience. A:

Q: Okay.

End Statement

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Follow Up Report # SA 2

Narrative Text Report #8

Document: **07 SUBJECT STATEMENT**Author: **3172 - GRIGGS, JEFFREY 0670**

Subject: PHONECALL 3-7

Related date/time: Mar-07-2017 (Tue.) 1631

On 3-7-2017 at 1631 HRS I called at a three transfer of the recording. The following conversation took place in summary:

(I asked if he was John Hernandez' brother).

Yes.

(I asked if he knew what was going on with him (John).

He's been high as a kite the last few days. I don't know what's going on with him.

(I asked when the last time he had seen John was).

I dropped him off in downtown Sac on Sunday night.

(I asked if that was normal for him).

Yea, pretty much he's been high on meth and he just gets crazy on that stuff.

(I asked if John does any other drugs or was it just meth).

No. Meth, that's about it. He just loves that stuff.

I live here in Sacramento, foothill farms. I dropped him off Sunday night from San Jose. He was living in San Jose, in Campbell. He had court in the morning but my truck was vandalized in San Jose prior to that day and I couldn't take him to court. And plus he was too high to do anything so I dropped him off downtown.

(I asked if it was normal for him to be high).

It's always very normal. He's been doing it you know, the last 15 years.

(I asked if he functions like that or if he goes crazy).

He goes crazy. He's paranoid that people are after him, he's delusional.

(I asked if he'd talked to John since he'd dropped him off or if he knew what was going on).

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Follow Up Report # SA 2

I talked to him yesterday morning. He said he was at a hospital or something.
(I asked if he knew why John was at the hospital).
He just said, "I'm at the hospital I'm checking in here." He asked if I could pick him up and I said I didn't have a vehicle; all my windows were smashed out.
(I asked if John had a cell phone).
He does but he lost his phone. I don't know where it's at.
(I asked about when he spoke with John, whose phone he was using).
It was someone's (else's) phone. I don't know whose it was.
(I explained to that John had been in a fight with the Police and went into a medical distress after the fight and that he wasn't doing well. I told John was at Sutter General Hospital and that Detective Macaulay had just spoken with and that the hospital social worker would be in contact with The contact with and that the hospital social worker would be in contact with The contact with

END

phone call ended shortly thereafter).

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Follow Up Report # SA 2

Narrative Text Report #9

Document: 04 OBSERVATIONS

Author: 1076 - WERNER, BRADLEY D 7725 Subject: SGT WERNER'S OBSERVATION Related date/time: Mar-08-2017 (Wed.) 1440

SERGEANT SUMMARY REGARDING HOMICIDE TEAM CALL OUT: 17-64178

NOTIFICATION:

On Monday, 3/6/17, at 1605 hours, I was notified by SPD Lt. Rodgers of a homicide team call out regarding a possible death in custody in downtown Sacramento. The Police Department responded to a call for service at Alhambra/ L Street. Lt. Rodgers told me that upon arrival, officers arrested John Hernandez (2/10/83). S-Hernandez became unresponsive after the arrest and was transported to Sutter General Hospital by SFD. He was currently stable but critical with unknown injuries.

Patrol officers secured the scene, and a homicide call-out was initiated. Detectives T. Hunkapiller #0710 (IV143), E. Macaulay #272 (IV76), J. Griggs #670 (IV135), B. Robison #414 (IV47), D. Putman #870 (IV27), S. Ayers #763 (IV140), A. Englefield #563 (IV67), Chief of Police Louie, Deputy Chiefs Bernard and Bray, Captains Beezley and Coopwood, OOI Lt's Chan and McCloskey, Homicide Sgts Kinney, Start and I (IV21) were notified of the homicide call out and responded to the scene to conduct a death investigation

In accordance with Departmental agreement with the Sacramento County District Attorneys Office, District Attorney Investigators were notified but did not respond.

ARRIVAL AND SCENE:

At 1635 hours, I arrived on scene. I met with Patrol Lieutenant Rodgers and Patrol Sergeant Farnsworth. CSI Officer Linder had responded for scene for processing. Once the homicide team was present, Sergeant Farnsworth briefed us about the incident and the circumstances known to him at the time. The scene was secured with police barricade tape, and patrol officers had completed a neighborhood canvass. Evidence (victim's clothing, bullet casings, victim's vehicle) were located on scene by patrol officers and pointed out to investigators. All evidence was left in place and the investigation was turned over to the homicide team at that time.

INVOLVED OFFICER(S):

Officer's Name: Villegas, I.

Badge Number: 820

Hired Date: 7/16/2001

Height: 5-10

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Follow Up Report # SA 2

Weight: 240

Officer's Name: Hight, M.

345 Badge Number:

Hired Date: 5/27/2000

Height: 5-10 Weight: 200

Officer's Name: Dionne, C.

Badge Number: 395

Hired Date: 9/28/1998

Height: 6-03 Weight: 200

Officer's Name: Cunningham, A.

Badge Number: 496

Hired Date: 7/10/2006

Height: 5-06 Weight: 170

Officer's Name: Harrison, R.

Badge Number: 980

Hired Date: 1/4/2016

Height: 5-08 Weight: 232

Officer's Name: Paiz, D. Badge Number: 270

Hired Date: 7/10/2006

Height: 6-00 Weight: 250

Officer's Name: Spring, K.

Badge Number: 1006

Hired Date: 7/05/2016

Height: 6-00 Weight: 190

INVOLVED SUSPECT(S):

Name: Hernandez, John A

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Follow Up Report # SA 2

Sex: Male

Ethnicity: Hispanic DOB: 2/10/1983 Height: 5-06 Weight: 180

Numbers:

Prior Arrest(s):

Probation/Parole:

Suspect was on probation at the time of this incident.

Methamphetamine in blood. For additional information, see medical records. Injuries:

INVOLVED LESS- LETHAL WEAPONS:

Lt. Chan conducted a check and download of the involved officers Tasers. He told me the following.

Officer Villegas possessed a Department issued Taser X26 (serial number X00-215980). Officer Villegas also possessed a department issued collapsible baton (serial number 0299).

Officer Villegas's Taser and baton was carried on his uniform Sam Brown belt. Officer Villegas's Taser was booked into the Evidence and Property section by CSI personnel (see PR#947706).

Officer Hight possessed a Department issued Taser X26 (serial number X00-567570) which was carried on his Sam Brown belt.

Officer Dionne possessed a Department issued Taser X26 (serial number X00-369068) which was carried on his Sam Brown belt.

DETECTIVE FOLLOW-UP:

At approximately 1855 hours, I drove Officer Cunningham and myself to HOJ. I monitored interviews. Detective Macaulay was assigned as the Lead Detective for this incident. Detectives J. Griggs, D. Putman, A. Englefield, S. Ayers and E. Macaulay were responsible for the statements / interviews. Detective Sergeant Start, Detectives Robison and Hunkapiller were charged with the scene investigation.

Sgt. Kinney was tasked with downloading all In-Car Camera (ICC) video.

On 3/30/17, I contacted) who is the Building Engineer for 1201 Alhambra (AKT Properties). I asked if he would download the entire day (03/06/17) video for all cameras from this location.

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Follow Up Report # SA 2

Detective Griggs responded to the location and provided Mr. with an external hard drive. On 3/31/17, advised that he had downloaded the entire day to the external hard drive. I responded to 1201 Alhambra and retrieved the hard drive then delivered it to SPD Mike Baker who transferred the video to disc form. Mike Baker advised that he would book the disc's into evidence.

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Follow Up Report # SA 2

Narrative Text Report # 10

Document: **06 DETECTIVE SUPPLEMENT** Author: **3569 - MACAULAY, EDWARD 3072**

Subject: CASE SUMMARY

Related date/time: Mar-06-2017 (Mon.) 1500

I, Detective Macaulay #272 have been employed by the Sacramento Police Department as a Police Officer since 2006. I am currently assigned to the Office of Investigations, Major Crimes as a Detective with the Homicide Unit. My primary duties are to investigate crimes, including but not limited to assaults with deadly weapons, felony batteries, kidnapping, and homicide. In addition, my duties involve interviewing victims, witnesses, suspects, presenting cases to the Sacramento County District Attorney's Office for prosecution, as well as delivering courtroom testimony.

NOTIFICATION:

On 3/6/17, at approximately 1607 hours, I was notified by Sergeant Werner of a homicide team callout to 1201 Alhambra Blvd (Sutter Heath). This location is in the city and county of Sacramento. I arrived on scene at approx. 1635 hours. The scene was located in a hallway on the first floor of 1201 Alhambra Blvd. The incident had begun during a call for service at 1125 Alhambra Blvd (Rite Aid). The interior scene where the incident had concluded was secured by uniform Police Officers.

INITIAL OBSERVATIONS / ACTIONS:

I was informed the suspect's jacket was in a tree located in the parking lot of 1125 Alhambra Blvd. I directed Ofc. Borher to secure the area around the jacket with crime scene tape. She did so and remained at the location to provide security to the crime scene.

At approx. 1655 hours, Sgt. Werner and I entered 1201 Alhambra Blvd to locate the scene where the incident had occurred. Upon entering the hall where the suspect was taken into custody, I observed there was an officer securing the entry way of the hallway. Upon entering the hallway, I encountered the officers who had been involved in the incident. Sgt. Werner and I escorted them to an empty waiting room on the second floor. This was the area they remained in, until they conducted the walkthrough with investigators, prior to responding the Hall of Justice. Sgt. Kinney remained with the involved officers while we were attending the briefing.

BRIEFING:

At approximately 1731 hours, the investigative team as well as Internal Affairs, Office of Public Safety Accountability, Public Information Officer and members of the management team, received a briefing from Sgt. Farnsworth #3001. The investigative team consisted of Sgt. Werner, Sgt. Kinney, Sgt. Start, Lt. Mccloskey, Lt. Chan, Det. Englefield, Det. Griggs, Det. Putman, Det. Ayers, Det. Robison and I. Sgt. Farnsworth briefed the assembled team on the facts and circumstances known to him at the time. He provided us with the following information in summary:

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Follow Up Report # SA 2

At approximately 1353 hours, the California Highway Patrol transferred a 911 call to the Sacramento Police Communication Center. The caller was reporting a man who was attempting to fight people in the parking lot of the Rite Aid at 1125 Alhambra Blvd, in the City and County of Sacramento. The male was described male Hispanic adult, 40 years old, no shirt, jeans, and heavily tattooed. Ofc. Villegas #820 and Ofc. Dionne #395 and Ofc. Hight #345 responded to the call. Ofc. Villegas and Ofc. Dionne arrived on scene at 1434 hours. Ofc. Villegas made contact with the suspect, later identified as John Anthony Hernandez. As Ofc. Villegas made verbal contact with (S) Hernandez, who squared up on Ofc. Villegas. After several verbal commands to show his hands, the suspect runs south across L Street towards the entrance to 201 Alhambra Blvd (Sutter Medical Offices). Ofc. Dionne pursues (S) Hernandez on foot as does Ofc. Hight who arrives. (S) Hernandez enters 1201Alhambra Blvd. As he enters the building he attempts to enter an elevator. As the officers enter the building, (S) Hernandez turns and runs through the building. Ofc. Hight attempts to use his C.E.D. which is not effective. One of the probes strikes the suspect and one strikes the wall. Ofc. Hight is able to bring (S) Hernandez to the ground. (S) Hernandez was actively combative. Officer Villegas utilized the drive stun function of the C.E.D. which was also ineffective. Officers were giving (S) Hernandez verbal commands to stop resisting and to give them his hands. (S) Hernandez continued to be resistive. Ofc. Villegas utilized his baton which was also ineffective. Officers were eventually able to get (S) Hernandez handcuffed as Ofc. Paiz, Ofc. Spring, Ofc. Cunningham and Ofc. Harrison arrived.

At this time, (S) Hernandez was yelling and making noises. Officers sat him up and began checking his condition and placing him into the recovery position. (S) Hernandez stop talking or making noise and became unconscious as the fire department arrived. Sacramento Fire Department, Engine 4 and Medic 6 arrived on scene. They ultimately began CPR and transported (S) Hernandez to Sutter Medical Center, Sacramento for treatment, where he was stabilized.

Sgt. Farnsworth identified several witnesses who had been contacted. He provided the following witnesses:

(Employee at Sutter)

was walking out of the office when he observed the officers tase a large male Hispanic. He stated the male "had the power of a giant and would not give up."

(Employee at Sutter)

was going to go to Rite Aid and was walking to the locker room when she observed (S) Hernandez pacing and looking around. When she came out of the locker room, she observed 3-4 officers in a scuffle with (S) Hernandez. She heard the officers telling (S) Hernandez to stop, and the officers were asking for assistance.

(Security Guard, Sutter)

At approx. 1330 hours, security was called to room 420 to remove (S) Hernandez from the room. (S) Hernandez was escorted out of the building and exited the west side. (S) Hernandez then ran to the Rite Aid parking lot.

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(Security Guard)

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later observed the Officers chasing (S) Hernandez and then followed them into the hallway. Once there he observed the Officers telling (S) Hernandez to stop.

removed a subject from a second-floor room. They escorted the male was called to assist (Hernandez) from the building and then the male went to the Rite Aid. stated he savs he saw a taser fired and then observed the Taser deployed again as well as baton strikes. He stated the subject stated "I'm going to kill you mother fuckers."

At approximately 1803 Hours, I along with Det. Griggs, Det. Ayers, Det. Putman, Det. Englefield, Det. Hunkapiller and Sgt. Start conducted a walkthrough of the scene.

I proceeded to the second floor waiting room where the officers, Sacramento Police Officers Association representatives, Department Command Staff and Individual officer representation from the law firm Mastagni Holstedt were waiting. I spoke with Zeb Davis who informed me that the individual attorneys met with the involved officers and were ready to conduct interviews with the detectives. He also informed me the involved officers requested to walk through the area where the incident had occurred so they could have a better reference of the building layout during their respective interviews. It was understood, this was not a public safety walkthrough, nor was there a public safety statement at this time. He understood and stated they still wished to do a walkthrough. Sgt. Werner advised the Internal Affairs Division of the walkthrough, however they did not participate at that time.

At 1830 hours, I conducted a walkthrough with Ofc. Villegas. The walkthrough began inside of 1201 Alhambra Blvd, and then north to the Rite Aid parking lot where Ofc. Villegas had initially contacted (S) Hernandez. Zeb Davis accompanied Ofc. Villegas during this walkthrough. Once in the parking lot of the Rite Aid, Ofc. Villegas attempted to relate details about where everyone was when he arrived. I stopped him and informed him we would talk about everything when we were at Headquarters.

I then conducted a walkthrough of the building with Ofc. Paiz and Ofc. Spring. They had entered through the west doors of 1201 Alhambra Blvd, directly into the hallway where the officers were taking (S) Hernandez into custody. We conducted a walkthrough by entering that door.

At 1840, Sgt Farnsworth provided me with a CD. He informed me the CD contained the surveillance video from the Rite Aid store. I took custody of the CD and informed him I would book it into evidence.

I transported Ofc. Villegas and his attorney, Zeb Davis back to Police Headquarters (5770 Freeport Blvd) in my unmarked police vehicle. We arrived at approximately 1900 hours.

Lt. Chan retrieved the involved officer's C.E.D.'s and downloaded the usage reports. Lt. Chan provided an analysis of the number and duration of the C.E.D. activations. The download report which I viewed showed that three of the C.E.D.'s had been utilized during the incident. Ofc. Villegas's, Ofc. Dionne and Ofc. Hight's.

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Ofc. Villegas's C.E.D. had a malfunction and failed to fire. Ofc. Hight's C.E.D. was activated a total of six (6) times for a total activation time of 24 seconds. Ofc. Dionne's C.E.D. was activated four (4) times for a total of 20 seconds. The additional C.E.D.'s (Ofc. Paiz, Spring, Harrison and Cunningham) were not activated on 3/6/17.

Sgt. Start had been compiling the In-Car Camera (ICC) footage from the various responding officer's vehicles. This footage was reviewed by myself and Sgt. Werner. The video was also shown to the Interim Chief of Police Brian Louie. Chief Louie made the determination of what video(s) each individual officer would be permitted to view prior to their interview. The determination was as follows:

Ofc. Paiz and Ofc. Spring were permitted to view only their own ICC

Ofc. Villegas was permitted to view his ICC, Ofc. Dionne's ICC and Ofc. Paiz's ICC.

Ofc. Dionne was permitted to view his ICC, Ofc. Villegas' ICC and Ofc. Paiz's ICC.

Ofc. Hight was permitted to view his own ICC and Ofc. Paiz's ICC.

Ofc. Cunningham and Ofc. Harrison were permitted to view Ofc. Paiz's video.

Once the officers had viewed the videos with their attorneys, detectives began interviews. I interviewed Ofc. Villegas in an interview room which was both audio and video recorded. Present during the interview was Zeb Davis who was Ofc. Villegas' attorney. For a full transcript of the interview, refer to the attached transcript.

The additional involved officers were interviewed by detectives. The interviews were as follows:

- -Officer Hight interviewed by Detective Griggs
- -Officer Dionne interviewed by Detective Ayers
- -Officer Cunningham interviewed by Detective Englefield
- -Officer Harrison interviewed by Detective Englefield
- -Officer Paiz interviewed by Detective Putman

Officer Spring interviewed by Detective Putman

For a detailed transcript of individual statements, refer to the attached transcripts of their statements.

Based on interviews from the involved officers, it was determined that Ofc. Hight, Ofc. Dione, Ofc. Villegas and Ofc. Paiz had sustained injuries during the attempt to take (S) Hernandez into custody.

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Ofc. Dionne sustained the following injuries:

-abrasion to top of left hand -abrasion to top of right hand

Ofc. Hight sustained the following injuries:

-abrasion to left middle finger

Ofc. Paiz sustained the following injuries:

-abrasion to right side of hand

Ofc. Villegas sustained the following injuries:

-abrasion to right knee

None of the injuries sustained by the officers required medical attention at the time of the incident.

It was learned during Ofc. Villegas and Ofc. Dionne's interviews, the C.E.D. activation from Ofc. Dionne's C.E.D. was done by Ofc. Villegas. Ofc. Dionne had not utilize his C.E.D. during the incident.

I made a request to the Sacramento Police Department Communication Supervisor to compile the dispatch audio recordings as well as the 911 audio so I could review it and later book it as evidence. I later responded to the Communication Center where I retrieved audio and copied it to a department USB drive. The audio files were later transferred to a CD and booked into evidence.

I authored a request to the Sacramento Regional Fire/EMS Communications Center for the dispatch recordings from the fire units as well as associated radio traffic. I retrieved these recordings, reviewed them and booked them into evidence.

I authored a search warrant to Sutter Medical Center, Sacramento and the Sacramento Fire Department for all medical documentation associated with (S) Hernandez's medical treatment on 3/6/17. The warrant was reviewed by Chief Deputy District Attorney Rod Norgaard. The Honorable Judge Steve White of the Sacramento Superior Court signed the search warrant. Judge White also sealed the search warrant.

I contacted	via telephone. Records check	ks showed she was po	ssibly the sister of (S) Her	nandez.
I spoke to her via telepho	one. The conversation was aud	lio recorded. She infor	rmed me that her bother,	
had picked (S) Hernandez up in San Jose or	n Sunday. She inform	ed me (S) Hernandez had	been up
for three days due to bein	ng high on methamphetamine.	She stated was	s not able to take (S) Herna	andez to
his house due to his methamphetamine addiction, nor did she allow him at her house. She stated				
(S) Hernandez off in dow	vntown Sacramento. (W)	provided me with	telephone number.	Detective

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	Follow Up Report # SA
Griggs contacted via telephone and obtained a statement. I informed (W)	hat her brother (S)
Hernandez was in the hospital, and provided her the location. I later made a CD of the a	udio recording and
booked it into evidence.	
(W) provided me the phone number for who she identified as ((S) Hernandez's mother.
I called at the number provided, there was no answer. I left a messag	e with my contact
information. I was later informed in the following days by hospital staff that	was at the
hospital.	
On 2/0/17 I reamanded to the Cutter Medical Center Correments and met with the Niver	and House Ermontage

On 3/8/17, I responded to the Sutter Medical Center, Sacramento and met with the Nursing House Supervisor. She directed me to the Health Information Management Department. I served them with a copy of the search warrant. I left a copy of the sealing order signed by Judge White. They provided me with a password protected CD which contained approximately 800 pages of medical records associated with (S) Hernandez's hospitalization. I reviewed the document and booked the records into evidence. In addition, I scanned a copy of the records into the report.

Included in the search warrant for Sutter Medical Center, Sacramento was for samples of blood and urine taken from (S) Hernandez upon his arrival at the hospital on 3/6/17. Lab personnel provided me with the samples. I seized these samples and transported them the Sacramento County District Attorney's Crime Lab. I transferred chain of custody of the blood and urine samples to Allyson Avina at the County Crime Lab at 1245 hours on 3/8/17.

On 3/9/17, I contacted Diana Yates of the Sacramento Fire Department. I served her with the search warrant. She provided me with the Fire Dispatch Logs as well as the Patient Care Report. I reviewed the documents and later scanned them into the report.

I was contacted by Sacramento Fire Department Captain Keith Wade (Engine 4) via telephone. He informed me when he heard the request from police for the fire department, his engine was leaving Station 4 on separate medical call. He informed dispatch, that based on the proximity of the call at 1201 Alhambra Blvd and their station (One city block) they would respond to that call. Captain Wade informed me when they arrived (S) Hernandez had agonal breathing, and then it stopped. He stated they immediately initiated Pit CPR. He explained Pit CPR is a technique where EMS personnel will do CPR on scene, uninterrupted, for an extended period, and this approach has a higher success rate. Captain Wade informed me they did not roll (S) Hernandez, nor did they examine his back. He also stated (S) Hernandez did not say anything while they were on scene, and that he was later intubated.

I made periodic inquiries as to (S) Hernandez's medical status at Sutter Medical Center, Sacramento.

On 3/13/17 (W) called to inquire about (S) Hernandez's property. She informed me that if he was not under arrest she wanted his property back. I informed her it was still an open investigation and the property was evidence. She informed me she wanted his wedding ring and watch back. I informed her those items were not booked as evidence by the police department. I explained to her that (S) Hernandez would need to make a request

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Follow Up Report # SA 2

to have his property returned unless he was unable to do so. I inquired to see if that was the case. (W) refused to provide me with (S) Hernandez's medical condition. I informed her I would not be authorizing the release of any of (S) Hernandez's property to her at this time.

On 3/16/17 I received a call from risk management at Sutter Medical Center. They informed me they reviewed the documentation and stated I would just need to call and they would provide me updates on (S) Hernandez's condition over the phone.

I reviewed the ICC footage of responding officers. The footage from the majority of the responding officers, showed only an emergency response. These emergency responses, did not record any portion of the struggle with (S) Hernandez. The ICC's of value were; Ofc. Villegas, Ofc. Dione, Ofc. Hight and Ofc. Paiz.

The ICC from Ocf. Villegas' vehicle was manually activated when he arrived on scene. The ICC shows the initial interaction between Ofc. Villegas and (S) Hernandez. The video shows (S) Hernandez make a lunging motion towards Ofc. Villegas after he makes verbal contact with (S) Hernandez. Ofc. Villegas orders (S) Hernandez to take his hands out of his pockets, which he eventually does. Ofc. Dionne arrives and enters the ICC frame as Ofc. Villegas informs him (S) Hernandez is squaring off on him. Ofc. Villegas draws his C.E.D. and orders (S) Hernandez to the ground. (S) Hernandez retreats behind a vehicle he is standing next to, that has the passenger side door open and at least one occupant in the vehicle. He is ordered to the ground several additional times. He does not comply and appears to make an attempt to enter the open car door. (S) Hernandez runs south from the parking lot of the Rite Aid, towards 1201 Alhambra Blvd. Ofc, Villegas is heard telling Ofc. Dionne to let him run.

Ofc. Dionne's ICC was also manually activated as he arrived on scene. He had turned the camera so it pointed north, to where (S) Hernandez was standing. The ICC depicts the same incident as Ofc. Villegas' ICC. Ofc. Villegas' patrol vehicle is visible in the frame.

Ofc. Hight's ICC shows him responding with his emergency lights and siren activated. (S) Hernandez is visible running south across L St from the Rite Aid.

Ofc. Paiz's vehicle is also an emergency response. The vehicle stops on the east curb line of Alhambra Blvd on the west side of 1201 Alhambra Blvd. The body worn microphones on each of the officers captures the audio from inside the hallway. Per Ofc. Paiz and Ofc. Spring's statements, (S) Hernandez is already in custody at this point, and they assist in maintaining control of (S) Hernandez on the ground.

Officers and investigators canvased the area for surveillance video. An exterior camera on the Rite Aid was observed. Officers contacted the Rite Aid employees who informed them the exterior video camera was broken and did not record. They informed Officers there was footage of the man involved in the incident with police when he entered the store prior to the incident with police. They provided the officers with a CD which contained the video clips. This disk was later given to me my Sgt. Farnsworth. I reviewed the video and booked it into evidence.

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There were four cameras located at 1201 Alhambra Blvd in the path of (S) Hernandez. One camera was located above the entrance door. One was in the parking garage east of the front door, which faced west, and captured the view of the front door. A camera was located in the lobby and faced north towards the front door. There was one additional camera in the hallway where the confrontation ended. This camera was located half way down the hall and faced, west out the west door. This camera did not capture the incident as the suspect, nor the officers were far enough down the hallway.

No other cameras were located that captured any part of the incident. Sgt. Werner later responded to 1201 Alhambra Blvd and retrieved more video from 3/6/17. Refer to his observations for further.

On 3/29/17, Anita Chabria who is employed by the Sacramento Bee, wrote an article regarding the incident with (S) Hernandez. Ms. Chabria had represented herself as a member of (S) Hernandez family to gain access to the hospital room. According to the Nursing House Supervisor she had the assistance of (S) Hernandez's mother. Chabria produced a video recording of both (S) Hernandez in his hospital bed, as well as an interview with I utilized "WebPreserver" to capture the news story from "http://www.sacbee.com/news/local/crime/article141343523.html" and attached this to the report.

Photographs of (S) Hernandez's back were not obtained at or near the time of the event. At the time photographs were taken of the front of (S) Hernandez, he was lying in a hospital bed. He was medically unstable and had a great deal of life sustaining equipment on him. Due to these medical necessities to sustain his life, he was not rolled or moved for the purpose of taking pictures.

I had multiple conversations with medical staff at the hospital, regarding moving (S) Hernandez for the purpose of taking photographs. Later the conversation was regarding their legalities in assisting in the collection of pictures in violation of H.I.P.P.A. The hospital staff was unwilling to move (S) Hernandez for pictures, due to legal concerns. They were also concerned because his family had instructed not to give information to the Police Department.

The blood sample obtained from the hospital were tested by the Sacramento County District Attorney's Crime Lab. The results were positive for methamphetamine at a concentration of 1781 ng/mL. John Anthony Hernandez was in violation of section 69 of the California Penal Code, Resisting an executive officer while using force or violence when he fled from officers and the subsequent struggle. On 3/7/17, (S) Hernandez was released from custody per 849b (1) PC. On 4/12/17, I submitted a warrant request to the Sacramento County District Attorney's Office for a violation of 69 PC.

On 4/12/17, I obtained a copy of (S) Hernandez's medical records as of 4/12/17. These medical records were booked into evidence.

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Follow Up Report # SA 2

Narrative Text Report #11

Document: **06 DETECTIVE SUPPLEMENT**Author: **3170 - ENGLEFIELD, ASHLEY 0563**

Subject: **DET OBS**

Related date/time: Mar-07-2017 (Tue.) 1239

On 03/06/17 at approx. 1600 hours I was assigned to assist in the investigation of an officer use of force near the intersection of L St. and Alhambra St. I arrived on scene at approx. 1632 hours.

At approx. 1733 hours myself along with other member of the SPD Homicide Unit were briefed as to the facts and circumstances known at the time by Sgt. Farnsworth #3002 of the patrol division. At approx. 1803 hours myself along with other member of the SPD Homicide Unit conducted a walk through of the scene.

At approx. 2249 hours I conducted an interview with Officer Cunningham #496 in the number 6 interview room at HOJ.

At approx. 2357 hours I conducted an interview with Officer Harrison #980 in the number 6 interview room at HOJ.

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Follow Up Report # SA 2

Narrative Text Report #12

Document: 06 DETECTIVE SUPPLEMENT Author: 3015 - KINNEY, BRIAN 3052 Subject: KINNEY OBSERVATIONS Related date/time: Mar-07-2017 (Tue.)

SERGEANT SUMMARY REGARDING HOMICIDE TEAM CALL-OUT:

NOTIFICATION:

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On Monday, 3/6/17, I, Sergeant Kinney #3052, was notified by Sergeant Werner of a Homicide Team Call-Out to 1201 Alhambra Blvd in East Sacramento. The Police Department had responded to the area of this location on a call for service. During the call, officers were involved in a struggle with a subject. The subject, later identified as John Hernandez, was transported by SFD to Sutter General for treatment. At the time of the call-out, S-Hernandez was in serious but stable condition. I responded to the scene to assist.

ARRIVAL:

At 1634 hours, I arrived on scene.

At approximately 1700 hours, I responded to the 2nd floor of 1201 Alhambra Blvd and waited with the involved officers. Also present were SPOA Representatives, SPD Management, Department Peer Support and Law Enforcement Chaplin's. At no time did I inquire about the incident from the involved officers. I remained with the officers until they left the scene to respond to Police Headquarters.

DEPARTURE:

At 1900 hours, I departed the scene and returned to police headquarters to assist with follow-up.

FOLLOW-UP:

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From Sergeant Start, I collected the ICC SD cards from the following vehicles: 11282 (Officer Villegas) and 11669 (Officer Hight). At Police Headquarters, I uploaded the videos into the ICC Back-End Client.

Sergeant Ligon responded to Police Headquarters with ICC SD cards from the following vehicles: 12076 (Officer Dionne) and 12077 (Officer Paiz). I uploaded the videos into the ICC Back-End Client.

Once uploaded, the SD cards (11282 and 11669) were given to Sergeant Ligon who placed them back in there respective vehicles.

I was tasked with loading the following ICC videos for Officer Dionne and his SPOA Attorney: 11282, 12076 and 12077. This was done on a department desktop computer.

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On 3/7/17, I gave Brian Dingman the SD cards for 12076 and 12077. He was going to return them to there respective vehicles.

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Follow Up Report # SA 2

Narrative Text Report #13

Document: **06 DETECTIVE SUPPLEMENT**Author: **31 - AYERS, SHAWN E 3002**Subject: **DET. AYERS SUPPLEMENT**Related date/time: **Mar-07-2017 (Tue.)**

Observations: Det. Ayers #0763 (IV140)

I, Detective Ayers #763, am currently assigned to the Homicide Unit with the Sacramento Police Department.

On 3-06-17, at approximately 1615 hours, I received notification from SPD Detective Sgt. Werner #3116 (IV21) stating there was a homicide team call out and to respond 1201 Alhambra Blvd. to assist with a possible Death in Custody investigation. I responded to the scene from the office and arrived at approximately 1637 hours.

Upon arrival I observed that the scene was secured with yellow crime scene tape, marked patrol vehicles and uniformed police personnel. I had been informed that the suspect was no longer on scene and had been transported to the hospital for medical treatment.

At approximately 1731 hours, the homicide team (Sgt. Werner #3116, Sgt. Kinney #3052, Det. Englefield #563, Det. Griggs #670, Det. Hunkapiller #710, Det. Macauley #272, Det. Putman #870, Det. Robison #414 and I) attended a briefing conducted by Sgt. Farnsworth #3002 (2SM6). The briefing was held just outside the Sutter Medical Facility located at 1204 Alhambra Boulevard. Sgt. Farnsworth provided all information known to him at the time of the briefing to the homicide team. See Det. Macauley's supplement for briefing details.

During the briefing the homicide team was advised by Sgt. Farnsworth that they had received a call of a subject causing a disturbance at the Rite-Aid located at 1125 Alhambra Boulevard. Officers Dionne and Villegas arrived to the location where they made contact with the subject. The subject squared off with Officer Villegas and then took off running across Alhambra Boulevard and into the Sutter Medical building located at 1204 Alhambra. Officer Hight responded to assist. Officers Dionne and Hight chase after suspect who squared up at the officers as they gave chase through the hallway of the building. Officer Hight fired his Taser, suspect took off running where both Officer Dionne and Hight tackle the suspect. Officers attempt to gain control by attempting to use the stun mode on the Taser. Eventually, suspect was handcuffed.

Sgt. Farnsworth advised that Engine 4 and Medic 6 had arrived on scene and started CPR as the suspect became unresponsive. Medics were able to get a pulse and transported suspect to Sutter General Hospital.

Sgt. Far	nsworth advised that the suspe	ct was identified as John Anthony HERNANDEZ, DOB
2-10-83, CDL#	, and had an Xref#	, where he was currently located at Sutter General
Hospital, ICU, room	#4610. (Officer Southward ha	d been assigned to monitor HERNANDEZ).

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Det. Englefield, Det. Griggs, Det. Putman, Det. Macauley (assigned as lead detective) and I were directed by Sgt. Werner to respond back to HOJ and interview the involved Officers and witnesses provided by Sgt. Farnsworth.

At approximately 2145 hours, I conducted an interview with Officer Dionne # 395 in interview room #2, located at the Sacramento Police Headquarters (5770 Freeport Boulevard). Present during the interview was Officer Dionne's attorney, Kevin Wiemer from the Mastagni Holstedt Law Firm. The interview was audio and video recorded and later booked into evidence (PR# 947774-1).

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GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Follow Up Report # SA 2

Narrative Text Report #14

Document: 06 DETECTIVE SUPPLEMENT Author: 442 - HUNKAPILLER, TRAVIS A 3108 Subject: DET HUNKAPILLER OBSERVATIONS

Related date/time: Mar-07-2017 (Tue.)

I, Detective Hunkapiller #710, am currently assigned to the Sacramento Police Department's Major Crimes Division, Homicide Unit. My primary responsibilities are to investigate homicides, suspicious deaths, kidnappings, "in custody" deaths and officer involved shootings.

On 3/06/17 at approximately 1607 hrs, I was notified by Sergeant Werner of a Homicide Team call out to 1201 Alhambra Blvd (Sutter Health) related to a possible Death in Custody. I responded from police headquarters and arrived on scene at approximately 1635 hrs. Upon my arrival, I observed a crime scene secured by police crime scene tape and numerous uniformed officers.

At approximately 1731 hrs, Sgt Farnsworth conducted a briefing of the incident and advised the investigative team of the facts / circumstances known to him at that time. *** See Detective Macaulay Supplement for a detailed summary of the briefing ***

At the conclusion of the briefing, Sgt. Werner assigned Detective Robison and I to conduct the crime scene investigation. *** See Detective Robison Supplement ***

On 3/07/17, Detective Robison and I were assigned to follow up interviews with several witnesses. We contacted the following witnesses and obtained statements:



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•

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These interviews were audio recorded via digital recorder. *** See Witness Statements ***

End Investigation

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Follow Up Report # SA 2

Narrative Text Report #15

Document: **06 DETECTIVE SUPPLEMENT** Author: **3765 - START, JASON P 4106**

Subject: **START OBS**

Related date/time: Mar-09-2017 (Thu.) 709

I am currently assigned as the Felony Assaults Supervisor.

On 3-6-17 I responded to 1201 Alhambra Blvd for a potential Death In-Custody investigation. I arrived in the area at approximately 1645 hours.

At approximately 1731 hours Sgt. Farnsworth provided a briefing of the details known to him at the time.

I was assigned as the Scene Sergeant. Detective Robison was assigned the scene detective with Detective Hunkapillar assisting. CSI Officer Lindner and FI Behrens were assigned to process the scene.

The scene recorder was initially Officer Maclean who was later relived by Officer T. Steigerts.

At approximately 1803 a scene walk-thru was conducted and the known evidence was identified. All items of evidence remained in place until collected by CSI.

At approximately 1806 hours I conducted a scene walk-thru with Sergeant Bryant, OPSA Francine Tournour and Captain Coopwood.

While at the scene I removed four ICC SD cards from the following vehicles.

11282 Officer Vilegas' vehicle

12076 Officer Dionne's vehicle 11669 Officer Hight's vehicle

12077 Officer Paiz' vehicle

I removed the SD cards for vehicle's 11282 and 11669 and gave them to Sgt. Kinney.

I removed the SD cards for vehicle's 12076 and 12077 and gave them to Sgt. Ligon who later transported them to HOJ.

The scene processing was completed at approximately 2150 hours. I remained at the scene until processing was completed. I later returned to HOJ.

Nothing further.

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Follow Up Report # SA 2

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Follow Up Report # SA 2

Narrative Text Report #16

Document: 06 DETECTIVE SUPPLEMENT
Author: 3569 - MACAULAY, EDWARD 3072
Subject: ADDITIONAL CASE OBSERVATIONS

Related date/time: Apr-13-2017 (Thu.) 838

The Sacramento Police Department's Professional Standards Unit Downloaded the video of responding officers. The video the officers viewed the night of the incident are additionally maintained on the Arbitrator 360 - Back End Client. These recordings are given file names in that system. The following videos were shown to the officers prior to their interviews on 3/6/17. They were as follows:

Officer Villegas - Vehicle 11282

Filename - 223443.AV

Officer Dionne - Vehicle 12076

Filename - 223459.AV

Officer Paiz - Vehicle 12077

Officer Spring Filename 223612.AV

Officer Cunningham - Vehicle 11439 Officer Harrison Filename 223536.av

On 4/13/17, I spoke with Dr. of Sutter Medical Center, Sacramento. At the time, she was the hospitalist who was treating (S) Hernandez. She informed me she was in the process of trying to discharge him from the hospital. I inquired to the condition of (S) Hernandez. Dr. relayed to me, (S) Hernandez was beginning to walk and she eventually expected his ability to to walk, to improve. She stated he was only able to speak a few words. She anticipated him to require 24/7 care for the remainder of his life. She stated he would need the assistance for basic functions, such a bathing. Dr. stated (S) Hernandez would not understand what was occurring if he were to go to court.

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Follow Up Report # SA 2

Narrative Text Report #17

Document: **06 DETECTIVE SUPPLEMENT** Author: **3448 - PUTMAN, DAVID 0870**

Subject: **DET PUTMAN 870**

Related date/time: Aug-12-2017 (Sat.) 1131

I, Detective Putman #870 (IV127), have been employed by the Sacramento Police Dept. as a sworn Police Officer since 2005. I am currently a Police Detective assigned to the Felony Assaults Unit. On 3-6-17 at approx. 1700 hours I was advised of a possible in custody death that occurred at 1201 Alhambra Blvd. I responded to the scene and at approximately 1731 hours Sgt. Farnsworth provided a briefing of the details known to him at the time.

I checked in with the scene recorder, Officer Maclean.

At approximately 1803 a scene walk-thru was conducted and the known evidence was identified. All items of evidence remained in place until collected by CSI.

I was then tasked with conducting an involved Officer interview at HOJ where there are interview room that are both audio and video recorded. I responded back to HOJ and at approx 2321 hours I interviewed Officer K. Spring #1006 regarding his involvement in the arrest and after force care of John Hernandez. Officer Spring was accompanied by his legal representative Kevin Wiemer throughout the entire interview.

The audio/video recording of the interview was later booked as evidence.

No further actions.

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Follow Up Report # SA 3

Follow Up Report # SA 3

Assignment Information

Assigned to: 1105 - WOMACK, STEVEN 7730 (Rank:

Capacity: SUPPLEMENTAL ADD (NOT FOR DETECTIVE USE) Org unit: OOO PATROL DIST 4 DAY

(TEAM 20)

Assigned on: Mar-06-2017 (Mon.) 1035 by: 1105 - WOMACK, STEVEN 7730 (

Report due on: Mar-07-2017 (Tue.)

Submission Information

Submitted on: Mar-06-2017 (Mon.) 2154

Approved on: Mar-06-2017 (Mon.) by: 3625 - LIGON, JENNIFER 3009

Follow Up Conclusion Follow Up concluded: **Yes**

Narrative Text Report #1

Document: 04 OBSERVATIONS

Author: 1105 - WOMACK, STEVEN 7730 (

Subject: WOMACK 729

Related date/time: Mar-06-2017 (Mon.) 1900

On 3/6/17 at approx. 1436 hrs. I was on uniformed patrol driving a marked patrol car. I was traveling eastbound on Broadway at Franklin Blvd. when I heard dispatch advise over the police radio that sector 6 officers were in foot pursuit of a suspect southbound on Alhambra Blvd. near the "Rite Aid" store.

I switched over to Channel 3 and responded code 3 northbound Alhambra Blvd. to assist with the foot pursuit. As I got to the area of 1201 Alhambra Blvd.I observed an unknown security guard frantically waving at me and pointing towards the west door of the building. I believed this to be the area were the pursuing officers may have chased the suspect.

I parked my car and then quickly entered the building. As I walked eastbound through a hallway I located 3 officers (Dionne, Villegas and Hight) attempting to handcuff a subject. The subject was laying face down on the floor and was actively resisting by kicking and pulling his arms and hands out of the grasp of the officers. I could see the officers breathing heavy and were sweaty. As I was arriving other SPD officers were arriving as well. Several of these officers got down on the floor to assist with the arrest. At least two of the original officers (Villegas and Dionne) got up

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Follow Up Report # SA 3

and off the suspect and moved out of the way. I did not see any punches thrown, baton strikes, deployment of OC spray or CED's.

I noticed that both Dionne and Villegas appeared to have abrasions to their hands. Both were breathing heavily, sweating profusely and red in the face from the struggle with the suspect. I noticed several deployed CED units laying on the floor next to the cluster of officers trying to arrest this person however, I did not see the deployments. Based on my training and experience, I did not witness any actions of the officers to be excessive or an unreasonable use of force to handcuff the suspect.

I heard an unknown voice say something to the effect of "he's cuffed". I walked out the door, I originally came in, and could still hear sirens off in the distance. I believed they were responding to this scene. I advised over the radio the suspect was detained and no further assistance was needed.

I felt it necessary for code 3 fire and ambulance respond due to the fact that CED's had been deployed and the suspect could possibly use medical attention. I also felt that the officers should be checked out as well for their injuries.

The fire department responded and arrived on scene. I was still standing at the west door when officer Dionne got my attention and said there was something medically wrong with the suspect and the fire department had started CPR. I contacted Sgt. Farnsworth over the telephone and told him what I knew and he advised me to start "taping off the scene." I requested several patrol units to assist with that task. I was then contacted by an unknown man who told me he was the "building manager" and there might be video of the incident from the surveillance cameras. I requested officer Donnell and his partner Boresz to accompany this person to go look at the surveillance video. I also requested CSI for photos of the scene and injuries to the officers. The suspect had been transported to the hospital by EMS.

Sgt. Farnsworth arrived and took charge of the scene.

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Follow Up Report # SA 4

Follow Up Report # SA 4

Assignment Information

Assigned to: 1066 - WARREN, JASON 0486 Rank:

Capacity: SUPPLEMENTAL ADD (NOT FOR DETECTIVE USE) Org unit: OOO CENTRAL MARINE

UNIT

Assigned on: Mar-06-2017 (Mon.) 1035 by: 1066 - WARREN, JASON 0486

Report due on: Mar-07-2017 (Tue.)

Submission Information

Submitted on: Mar-06-2017 (Mon.) 1740

Approved on: Mar-06-2017 (Mon.) by: 1076 - WERNER, BRADLEY D 7725

Follow Up Conclusion Follow Up concluded: **Yes**

Narrative Text Report #1

Document: 04 OBSERVATIONS

Author: 1066 - WARREN, JASON 0486

Subject: WARREN #486

Related date/time: Mar-06-2017 (Mon.) 1353

03-06-17, 1436 hours, I, Officer Warren #486 (Beat6) responded to 1201 Alhambra Blvd regarding a code three cover request. Officers advised that a subject ran from them and were requesting additional units to assist. I responded code three from 10th St / X St to the scene.

As I arrived on-scene a security Officer for Sutter Medical Group (1201 Alhambra Blvd) directed me to a side door located on the west side of the business. I entered the building and saw Officers in the hallway approximately 20' from me. As I approached the Officers I observed a subject laying face down handcuffed. Officers had the subjects legs bent towards his back preventing him from kicking them. The subject was yelling and continued to struggle attempting to free himself. There were several Officers holding the subject down so I didn't assist with restraining him.

Officer Dionne advised me that there was a witness in the Rite Aid parking lot where the incident started. The subject was a male black seated in a gray vehicle. I responded to the Rite Aid parking lot and was unable to locate the witness he described or any other witnesses.

I went back to 1201 Alhambra Blvd and observed fire department staff

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Follow Up Report # SA 4

administering CPR on the subject that Officers had detained. I secured the scene with Police tape preventing people from entering.

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Follow Up Report # SA 5

Follow Up Report # SA 5

Assignment Information

Assigned to: **4234** - **BORESZ**, **JEFFREY 0661** Rank:

Capacity: SUPPLEMENTAL ADD (NOT FOR DETECTIVE USE) Org unit: OOO TRAINING NORTH

Assigned on: Mar-06-2017 (Mon.) 1035 by: 4234 - BORESZ, JEFFREY 0661

Report due on: Mar-07-2017 (Tue.)

Submission Information

Submitted on: Mar-06-2017 (Mon.) 2156

Approved on: Mar-06-2017 (Mon.) by: 3625 - LIGON, JENNIFER 3009

Follow Up Conclusion Follow Up concluded: **Yes**

Narrative Text Report # 1

Document: **02 WITNESS STATEMENT** Author: **4234 - BORESZ, JEFFREY 0661**

Subject:

Related date/time: Mar-06-2017 (Mon.) 1958

On 03-06-17, at approximately 1500 hours, I, Ofc. Boresz #661 contacted (W) at 1201 Alhambra Blvd. (W) stated the following in

summary:

I was working on the first floor and staff had called me to see if I could help escort a patient on the fourth floor. Another security guard and I helped escort the patient out of the hospital.

The guy went to Rite Aid and sat out front. I noticed police went to Rite Aid and started to talk to the guy. Next thing I know I saw the guy running back towards the hospital and there were police officers chasing him.

The guy was calm and never caused an issue when he was with us.

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Follow Up Report # SA 5

Narrative Text Report # 2

Document: 04 OBSERVATIONS

Author: 4234 - BORESZ, JEFFREY 0661

Subject: OFC. BORESZ #661

Related date/time: Mar-06-2017 (Mon.) 1912

On 03-06-17, at approximately 1435 hours, Ofc. Donnell #407 and I (Ofc. Boresz #661) responded code 3 (activated our overhead emergency lights) to 1125 Alhambra Blvd. Ofc. Hight #345 and Ofc. Dionne #395 advised there was one subject running southbound on Alhambra Blvd. towards the hospital across the street.

We arrived on scene at approximately 1438 hours.

As soon as we exited our patrol vehicle, there were subjects standing by who advised the subject ran southbound towards Sutter Health (1201 Alhambra Blvd). Ofc. Donnell and I sprinted southbound from the Rite Aid parking lot towards 1201 Alhambra Blvd.

As we approached the hospital, there was staff inside who advised the officers and subject were down the hall. Once the front door opened, we entered the hospital and staff pointed to where the subject and officers were.

We continued to run down the hall way and observed officers struggling with the subject in front of a door entrance in the hallway. I could hear a subject yelling with slurred speech. I noticed Ofc. Dionne #395, Ofc. Harrison #980, Ofc. Paiz #270, and Ofc. Villegas #820 were all struggling with the subject and trying to keep him on the floor. I noticed the officers were on top of the subject trying to calm him down.

I had asked other officers if they needed relief from holding down the subject down, and Ofc. Villegas stood up and advised he needed to take a break. Another officer took his position in attempt to hold the subject down.

I contacted a Security Guard, and obtained his statement (see attached for further details). Security had contacted the building engineer via cell phone and advised he was the person in charge of the video surveillance.

I contacted subject at 1201 Alhambra Blvd. who advised he was the building engineer and would be able to look at the video surveillance. Subject was able to locate video surveillance and I noticed at 1432 hours a male subject sprint in the lobby and attempted to open the

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Follow Up Report # SA 5

elevators. After the elevators did not open, the subject continued to sprint down the hall way. Approximately nine seconds later, I noticed Ofc. Hight and Ofc. Dionne run into the lobby and continued down a hallway.

Subject advised the camera system was approximately three minutes fast.

Subject burned the video surveillance onto a flash drive and provided me with the flash drive.

Subject provided me with the flash drive.

At approximately 1835 hours, I provided Detective Griggs #670 with the flash drive.

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Follow Up Report # SA 6

Follow Up Report # SA 6

Assignment Information

Assigned to: 3278 - BURNHAM, PHILLIP 0416 Rank:

Capacity: SUPPLEMENTAL ADD (NOT FOR DETECTIVE USE) Org unit: OOO PATROL DIST 3 MID

(TEAM 15)

Assigned on: Mar-06-2017 (Mon.) 1036 by: 3278 - BURNHAM, PHILLIP 0416

Report due on: Mar-07-2017 (Tue.)

Submission Information

Submitted on: Mar-06-2017 (Mon.) 2336

Approved on: Mar-07-2017 (Tue.) by: 3015 - KINNEY, BRIAN 3052

Follow Up Conclusion Follow Up concluded: Yes

Narrative Text Report # 1

Document: 02 WITNESS STATEMENT Author: 3278 - BURNHAM, PHILLIP 0416

Subject:

Related date/time: Mar-06-2017 (Mon.) 2312

On 3/6/17 at approx 1815 Hrs I Officer Burnham #416 contacted (W) and obtained the following statement in summary.

Today (3/6/17) I was walking into the Rite Aide when a MHA approached me near the front door of the business. He had his hands out in front of him and it looked like he was trying to grab me. I think he was tweeking, he was fidgeting when he tried to grab me.

When I came back out of the store the MHA was on the side of the building. I went back to my car after that.

A little later I saw all the police officers run into the medical building.

The MHA was 5'6" and 165 to 170lbs. I think he was between 27-35 years old. His hair looked clean cut and had salt and pepper coloring. He was wearing a black shirt and black pants. I would be able to identify him if I saw him again.

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Follow Up Report # SA 6

Narrative Text Report # 2

Document: 04 OBSERVATIONS

Author: 3278 - BURNHAM, PHILLIP 0416

Subject: OFFICER BURNHAM

Related date/time: Mar-06-2017 (Mon.) 2233

On 3/6/17 at approx 1453Hrs Ofc Mclean and I Officer Burnham #416 were dispatched to 1125 Alhambra regarding a disturbance. We arrived on scene at approx 1511Hrs.

Upon our arrival we assisted with scene security,

Ofc Maclean began the crime scene log at approx 1517Hrs. At approx 1810Hrs Ofc Stigerts took over the crime scene log.

I conducted a records check of (S) Hernandez and determined he was on Formal Searchable probation till 2018.

Ofc Southward provided me with updates regarding (S) Hernandez status at the hospital and I passed the updates to Sgt Farnsworth.

I contacted (W) in the parking lot of Rite Aid and obtained her statement.

I conducted the following canvas of the surrounding area.

1127 Alhambra Bl (Jamba Juice) - arrived to work after the fire trucks were already on scene. also stated that the employees on the prior shift did not inform her of anything out of the ordinary.

1121 Alhambra (Freeway Insurance) - was inside the business all day and nothing out of the ordinary occurred.

1119 Alhambra (Sub Depot) - closed.

1117 Alhambra (Paradise Nails) - was inside the business all day and nothing out of the ordinary occurred.

1105 Alhambra (La Fiesta Taqueria) - was inside the business all day and nothing out of the ordinary occurred.

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Follow Up Report # SA 7

Follow Up Report # SA 7

Assignment Information

Assigned to: 2392 - FARNSWORTH, DANIEL 3002 (

Capacity: SUPPLEMENTAL ADD (NOT FOR DETECTIVE USE) Org unit: OOO PATROL DIST 6 MID (TEAM 35)

Assigned on: Mar-06-2017 (Mon.) 1053 by: 2392 - FARNSWORTH, DANIEL 3002 (

Report due on: Mar-07-2017 (Tue.)

Submission Information

Submitted on: Mar-06-2017 (Mon.) 2257

Approved on: Mar-07-2017 (Tue.) by: 3015 - KINNEY, BRIAN 3052

Follow Up Conclusion Follow Up concluded: **Yes**

Narrative Text Report # 1

Document: 02 WITNESS STATEMENT

Author: 2392 - FARNSWORTH, DANIEL 3002 (

Related date/time: Mar-06-2017 (Mon.) 2235

Approximately 1600 hrs. 3-6-17 I contacted witness a security guard on scene at the time of the event. He related the following in summary:

I am a security guard here. At exactly 130 PM I was called to room 420 and told to get this guy out of the building. The guy is the same guy that the police chased back into the building later (HERNANDEZ). When I got upstairs the guy (HERNANDEZ) had no shirt on and was acting crazy. He asked me where the dog was and that people were trying to get him. I asked for some help from (). He came from the second floor and assisted me in getting the guy out because he was resistive. We escorted him to the west door. When he got there, he just took off running. He ran around the building and over to the Rite Aid lot.

Later, when the police chased him inside, I followed after the police. The police tackled him but he kept fighting. I saw him (HERNANDEZ) get tazered a couple times. I don't know- the guy is crazy in the head. The police had a hard time with him (HERNANDEZ).

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Follow Up Report # SA 7

Narrative Text Report # 2

Document: 04 OBSERVATIONS

Author: 2392 - FARNSWORTH, DANIEL 3002

Related date/time: Mar-06-2017 (Mon.) 2220

Approx.1501hrs. 3-6-17 I, Sgt. D. Farnsworth#3002, responded to the scene at 1201 Alhambra Bl. Numerous officers were onscene as was SFD Engine 4 ("A" Shift) and SFD Medic 6. Fire personnel were treating John Anthony HERNANDEZ and preping him for transport to Sutter General Hospital.

I viewed the scene, updated the Watch Commander (Lt. Rodgers) and coordinated investigative efforts at the scene for investigators. I also briefed investigative parties upon their arrival.

I maintained contact with officers watching HERNANDEZ at Sutter General, recieving and updating concerned parties as to the current health state of HERNANDEZ.

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Follow Up Report # SA 8

Follow Up Report # SA 8

Assignment Information

Assigned to: 4349 - HARRISON, ROBERT 0980 () Rank:

Capacity: SUPPLEMENTAL ADD (NOT FOR DETECTIVE USE) Org unit: OOO TRAINING NORTH

Assigned on: Mar-07-2017 (Tue.) 1053 by: 4349 - HARRISON, ROBERT 0980 (

Report due on: Mar-07-2017 (Tue.)

Submission Information

Submitted on: Mar-07-2017 (Tue.) 232

Approved on: Mar-07-2017 (Tue.) by: 383 - HALSTEAD, GREG 4063

Follow Up Conclusion Follow Up concluded: **Yes**

Narrative Text Report # 1

Document: 02 WITNESS STATEMENT

Author: 4349 - HARRISON, ROBERT 0980 (

Subject:

Related date/time: Mar-07-2017 (Tue.) 109

On 03/06/17 at approx 1500 hrs, I, Officer Harrison made contact with Doctor inside the Sutter Medical Clinic located at 1201 Alhambra Blvd. Upon contact, I obtained the following statement In summary:

I was inside the recovery room on the 1st floor and I heard very loud noises through the walls coming from the hallway. I walked outside the recovery room, and walked westbound down the hallway.

As soon as I walked around the corner, I observed officers fighting with an individual on the ground in the middle of the hallway. I saw and heard the big Hispanic officer tell the guy they were fighting "if you don't stop, I'll Fuck you up!"

I did not see who, but as they were fighting on the ground, I heard the taser go off about 3 times. I then witnessed the big Hispanic officer hit the guy on his legs and thighs with his baton about 6 times.

The guy they were fighting was extremely resistant. It appeared as though he had the strength of a giant. The officers had a really hard time trying to subdue him.

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Follow Up Report # SA 9

Follow Up Report # SA 9

Assignment Information

Assigned to: 3862 - MOK, CARLYLE 0615 Rank:

Capacity: SUPPLEMENTAL ADD (NOT FOR DETECTIVE USE) Org unit: OOO PATROL DIST 6 MID

(TEAM 34)

Assigned on: Mar-06-2017 (Mon.) 1054 by: 3862 - MOK, CARLYLE 0615

Report due on: Mar-07-2017 (Tue.)

Submission Information

Submitted on: Mar-06-2017 (Mon.) 2137

Approved on: Mar-06-2017 (Mon.) by: 3015 - KINNEY, BRIAN 3052

Follow Up Conclusion Follow Up concluded: **Yes**

Narrative Text Report # 1

Document: **02 WITNESS STATEMENT** Author: **3862 - MOK, CARLYLE 0615**

Subject:

Related date/time: Mar-06-2017 (Mon.) 1558

On 03-06-2017 at approximately 1535 hours I, Ofc. Mok (badge #615) spoke with (Witness) (DOB:). At the time we spoke we were in the hallway at 1201 Alhambra Boulevard (Sutter Health Urgent Care) where she works as a patient care technician. She told me the following in summary:

I went across the street to Rite-Aid to buy a birthday card. I saw the guy pacing back and forth looking around. I bought my card and then walked back to work. As I was walking back I saw the same guy talking to some black guy. I walked inside my work, went to the women's locker room to use the restroom, then I walked out into the hallway. That's when I saw about three or four cops on top of the same guy I had just seen in front of Rite-Aid. They were all the hallway next to where the stairwell is. I was about two feet away from them all when this happened. The cops repeatedly said, "Stop! Stop!", and "Give up!". Then the bigger cop hit the guy about two times with his baton. I heard a taser go off (clicking noise) and a cop said, "It's not affecting him at all!" The taser didn't seem to work since there was no change in how he was reacting. Then I heard the taser go off another three or four times. Then one of the cops asked a private security guard who was standing with me if he could get some more security

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Follow Up Report # SA 9

guards to help them with the guy.

I knew it was the same guy I saw in front of Rite-Aid because I recognized the mole on his face. I don't remember anything else about him but the mole. We have a lot of strange people around here so I try to keep track of who's coming and going. At that point I felt comfortable enough to walk around them since I had to get to work. I walked by and didn't see anymore.

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Follow Up Report # SA 9

Narrative Text Report #2

Document: **04 OBSERVATIONS**Author: **3862 - MOK, CARLYLE 0615**

Subject: MOK

Related date/time: Mar-06-2017 (Mon.) 1814

On 03-06-2017 at approximately 1445 hours I, Ofc. Mok (badge #615) was dispatched to 1201 Alhambra Boulevard to assist units with an uncooperative subject. I arrived on scene at approximately 1455 hours and observed the following in summary:

I contacted (Witness) (DOB:) and obtained her statement (see supplemental statement).

I conducted a neighborhood canvas with the following results:

3022 L Street at approximately 1806 hours: Language barrier problem. Worker there didn't know if video was working. Advised owner would be on scene the next day.

1116 Alhambra Boulevard (Citibank): Closed no one inside; cameras pointing towards the street.

1100 Alhambra Boulevard (Bank of America): Closed no one inside; cameras pointing towards the street.

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Follow Up Report # SA 10

Follow Up Report # SA 10

Assignment Information

Assigned to: **3728 - DONNELL, JUSTIN 0407** Rank:

Capacity: SUPPLEMENTAL ADD (NOT FOR DETECTIVE USE) Org unit: OOO PATROL DIST 6 DAY

(TEAM 33)

Assigned on: Mar-06-2017 (Mon.) 1128 by: 3728 - DONNELL, JUSTIN 0407

Report due on: Mar-09-2017 (Thu.)

Submission Information

Submitted on: Mar-08-2017 (Wed.) 237

Approved on: Mar-08-2017 (Wed.) by: 383 - HALSTEAD, GREG 4063

Follow Up Conclusion Follow Up concluded: **Yes**

Narrative Text Report #1

Document: 04 OBSERVATIONS

Author: 3728 - DONNELL, JUSTIN 0407

Subject: OFC DONNELL #407

Related date/time: Mar-06-2017 (Mon.) 1909

On Monday, March 6, 2017 at approximately 1435 hours Ofc Boresz and I, Ofc Donnell (1B65) responded code 3 to assist other officers at 1125 Alhambra Blvd (Rite Aid) in regards to a male on scene with possible mental issues, running up to people in the parking lot saying he wanted to fight them. While en route it was broadcasted that the subject was running into the hospital. We arrived on scene at approximately 1438 hours.

Upon arrival we were directed by citizens to go southbound towards the medical building located at 1201 Alhambra Blvd. Ofc Boresz and I ran to the medical building and once inside we were directed by other citizens to where the subject and other officers were.

Once inside the hallway on the first floor I saw several officers on the ground with the subject in front of a closed door. It looked as though the officers were struggling to control the subject. I also saw two CED's on the ground near the officers. At about that time I thought I heard Ofc Cunningham say that relief was there and Ofc Villegas stood up and I helped him over the other officers. It appeared that Ofc Villegas was controlling the subjects upper body. I saw that Ofc Villegas appeared tired and out of breath. I saw the subject was on his stomach. Ofc Paiz and Ofc Harrison

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Follow Up Report # SA 10

were controlling the subjects legs. I saw Ofc Dionne near the subjects right shoulder. Ofc Womack, and Ofc's Pangelinan and Ofc Southward had also arrived on scene.

Ofc Paiz searched the subject and removed a wallet from him. Inside the wallet I found a California ID issued to the subject who was identified as John Hernandez with a DOB of 2-10-1983.

I went outside to Ofc Pangelinan's patrol vehicle and we conducted a records check of Hernandez. The records check revealed Hernandez was on F/S probation until 9-18-2018 for vandalism (594(A) PC).

Shortly there after the fire department responded and began providing first aid to Hernandez and ultimately transported him to a hospital.

Ofc Boresz contacted a subject on scene who burned the video surveillance onto a thumb drive. In the video surveillance Hernandez is seen running in through the north entrance of the building. A patrol car with their overhead emergency lights on was seen following Hernandez. Hernandez is seen attempting to open the elevator before running out of frame with Ofc Hight, Ofc Dionne and Ofc Villegas chasing after him. The subject who retrieved the video surveillance advised the video surveillance points to the exits/entrances of the building and there was no internal video surveillance of the incident inside the hallway. Ofc Boresz later released the video surveillance to Det. Griggs (Please see Ofc Boresz's observations for full detail).

Sgt Farnsworth (2SM6) was advised of our findings.

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Follow Up Report # SA 11

Follow Up Report # SA 11

Assignment Information

Assigned to: **3815 - SOUTHWARD, DUSTIN 0690** Rank:

Capacity: SUPPLEMENTAL ADD (NOT FOR DETECTIVE USE) Org unit: OOO PATROL DIST 3 DAY

(TEAM 14)

Assigned on: Mar-07-2017 (Tue.) 1128 by: 3815 - SOUTHWARD, DUSTIN 0690

Report due on: Mar-09-2017 (Thu.)

Submission Information

Submitted on: Mar-07-2017 (Tue.) 1422

Approved on: Mar-07-2017 (Tue.) by: 1076 - WERNER, BRADLEY D 7725

Follow Up Conclusion Follow Up concluded: **Yes**

Narrative Text Report #1

Document: 04 OBSERVATIONS

Author: 3815 - SOUTHWARD, DUSTIN 0690

Subject: **SOUTHWARD** # 690

Related date/time: Mar-06-2017 (Mon.) 1440

On 3/6/2017 at approx 1436 I, Ofc Southward # 690 (2B31) was on scene of an attempt pick up at 2825 Capitol Ave of a wanted subject when I heard units requesting code 3 cover via the radio. The location of the attempt pick up was approx 3 to 4 blocks away from the cover request (1125 Alhambra Blvd). I responded on foot to assist the officers. While en-route officers advised the suspect had fled on foot into 1201 Alhambra Blvd. I arrived on scene at 1201 Alhambra Blvd at approx 1440 hrs and observed the following in summary:

Upon my arrival I observed that officers had a male subject detained in handcuffs in the hallway of the building. Prior to my arrival officers had requested fire respond for the subject. A short time after my arrival Sacramento Fire personnel arrived on scene. When Fire began to evaluate the subject observed that the he was unresponsive. Fire began to render medical aid to the subject, and began CPR.

I rode in the ambulance with the suspect as Fire continued to render medical aid. The suspect was transported to the Sutter General Emergency room where hospital staff took over care of the suspect. While in the emergency room the suspects vitals declined again and CPR was resumed by

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Follow Up Report # SA 11

hospital staff. Hospital staff were successful in restoring the suspects vitals.

ER Doctor advised that the suspect was still in s very critical state and there was a high potential for brain damage. Furthermore, toxicology test results indicated that the suspect had methamphetamine in his system.

After a CT scan the suspect was moved to the ICU where he was sedated.

3SM6 was advised.

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Follow Up Report # SA 11

Narrative Text Report #2

Document: 04 OBSERVATIONS

Author: 3801 - PANGELINAN, THOMAS 0818

Subject: PANGELINAN #818

Related date/time: Mar-07-2017 (Tue.) 1355

On 03-06-17, at approximately 1436 hours, Ofc Southward and I (Ofc Pangelinan #818) were on an attempt pickup call at Sutter General when we heard a code 3 cover call come out at 1125 Alhambra Blvd. Officers were in foot pursuit of a suspect running southbound from that location.

Ofc Southward responded on foot from 2801 L St and I retrieved our patrol car at 2825 Capitol Ave. I responded code 3 and was flagged down by security guards at 1201 Alhambra Blvd. The security guard pointed down a long hallway where I could see officers trying to detain the suspect.

I voiced the location of 1201 Alhambra Blvd west entrance for units still responding. I proceeded down the hallway where I observed several officers trying to gain control of the suspects legs. The suspect was handcuffed and yelling. I relieved one of the officers who had control of the suspect's right arm. I maintain a wrist lock control hold as other officers were able to restrain his legs. After a few minutes, the suspect stopped trying to get up and was talking instead of yelling. Another officer relieved me and I returned to my patrol car. I assisted Ofc Donnell with records checks on the suspect.

The suspect was transported to Sutter General. I later responded to Sutter General and remained with the suspect with Ofc Southward until relieved by Ofc Burnham.

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Follow Up Report # SA 12

Follow Up Report # SA 12

Assignment Information

Assigned to: **3359 - LEONARD, KENNETH 0877** Rank:

Capacity: SUPPLEMENTAL ADD (NOT FOR DETECTIVE USE) Org unit: OOO PATROL DIST 6 LATE

(TEAM 36)

Assigned on: Mar-07-2017 (Tue.) 1128 by: 3359 - LEONARD, KENNETH 0877

Report due on: Mar-09-2017 (Thu.)

Submission Information

Submitted on: Mar-07-2017 (Tue.) 701

Approved on: Mar-07-2017 (Tue.) by: 1076 - WERNER, BRADLEY D 7725

Follow Up Conclusion Follow Up concluded: **Yes**

Narrative Text Report #1

Document: 04 OBSERVATIONS

Author: 3359 - LEONARD, KENNETH 0877 Related date/time: Mar-07-2017 (Tue.) 445

On 3-7-17 at approximately 0035 hours, I was assigned to guard Suspect John Hernandez at the Sutter General Hospital, 2801 L st Room #4610.

Nurse informed me they would not have a better idea Hernandez's medical condition until 1730 hours. They believed Hernandez would stay unconscious until then.

At approximately 0450 hours, Sgt Halstead requested I release Hernandez per PC 849(b). I completed a PC 849(b) form. Officer Alonzo put a copy of the form in Hernandez's property he had at the hospital.

We released Hernandez from our custody at 0500 hours.

I asked Nurse if she would call our dispatch when Hernandez was getting ready to be released from the hospital.

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Follow Up Report # SA 13

Follow Up Report # SA 13

Assignment Information

Assigned to: 4173 - ROSSI, STACI 6379 () Rank: FORENSIC INVESTIGATOR I/II

Capacity: MAJOR CRIME SUPPLEMENT (FORENSICS/ID USE ONLY) Org unit: OOI FORENSIC ID -

CRIME SCENE INVESTIGATION

Assigned on: Mar-11-2017 (Sat.) 2127 by: 4173 - ROSSI, STACI 6379 (

Report due on: Mar-21-2017 (Tue.)

Submission Information

Submitted on: Mar-11-2017 (Sat.) 2237

Checked by: 3617 - LOVITTO, KRISHA 6391

Approved on: Mar-13-2017 (Mon.) by: 3617 - LOVITTO, KRISHA 6391

Follow Up Conclusion Follow Up concluded: **Yes**

Narrative Text Report #1

Document: CSI REPORT

Author: 4173 - ROSSI, STACI 6379 (

Subject: PHOTOS AND EVIDENCE

Related date/time: Mar-11-2017 (Sat.) 2236

On 3/6/17 at approximately 1710 hours, I, FI Rossi #6379 (FI15) arrived at 2801 L Street - Sutter Medical Center to take injury photographs related to an in custody use of force incident. Upon arrival, I contacted Ofc. Southward #690 and Ofc. Pangelinan #818.

PHOTOGRAPHS

I took fifty (50) photographs of the following; which were uploaded into the Digital Crime Scene System (DCS):

John Anthony Hernandez (DOB 2/10/83)

- -Overall appearance
- -Hands
- -Injuries to the following areas:
 - -left wrist
 - -left knee
 - -right knee
 - -right calf
 - -right hand
 - -right middle finger
 - -right side of head/forehead

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Follow Up Report # SA 13

At approximately 1744 hours, I received a bag of the victim's clothing and personal property from Ofc. Southward #690 to be booked as evidence.

I cleared the scene and changed my location to 1201 Alhambra Blvd. to check in with on scene CSI units. Upon arrival at approximately 1802 hours, the scene was secured with crime scene tape, marked patrol units and uniformed officers. I contacted CSI Lindner #538 and FI Behrens #6368 to decide what still needed to be completed.

I cleared the scene and changed my location to 555 Sequoia Pacific Blvd. to book the victim's clothing. While enroute, I was asked to head to 5772 Freeport Blvd. - HOJ to assist Lt. Chan #4091 with photographing and processing the officer's tasers and baton used in the incident. Upon arrival at approximately 1856 hours, I contacted Lt. Chan #4091.

PHOTOGRAPHS

I took thirty-four (34) photographs of the following; which were uploaded into the Digital Crime Scene System (DCS):

Overall condition of the following tasers:

- -Serial #XOO-216381- Ofc. Cunningham #496
- -Serial #XOO-369068- Ofc. Dionne #395
- -Serial #XOO-564157- Ofc. Paiz #270
- -Serial #XOO-567570- Ofc. Hight #345
- -Serial #X13001NXF- Ofc. Harrison #980
- -Serial #X13002T5W- Ofc. Spring #1006
- -Serial #XOO-215980-Ofc. Villegas #820
- -Overall condition of the following baton:
 - -Serial #SPD 0299

EVIDENCE

I collected, packaged and transported the following items:

- -One (1) x26 taser, Serial #XOO-215980 collected from Ofc. Villegas #820
- -One (1) global swab of contact end of x26 taser, Serial #XOO-215980
- -One (1) global swab of contact end of x26 taser, Serial #XOO-215980
- -One (1) global swab of baton (SPD 0299)
- -One (1) global swab of baton (SPD 0299)
- -One (1) global swab of contact end of x26 taser, Serial #XOO-567570
- -One (1) global swab of contact end of x26 taser, Serial #XOO-567570

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Follow Up Report # SA 13

- -One (1) global swab of contact end of x26 taser, Serial #XOO-369068
- -One (1) global swab of contact end of x26 taser, Serial #XOO-369068

I cleared the scene and changed my location to 555 Sequoia Pacific Blvd. - Sacramento Police Property Section to book evidence collected. I arrived at approximately 2204 hours.

EVIDENCE

I booked the following items under PR#947706:

- -One (1) x26 taser, Serial #XOO-215980 collected from Ofc. Villegas #820
- -One (1) global swab of contact end of x26 taser, Serial #XOO-215980
- -One (1) global swab of contact end of x26 taser, Serial #XOO-215980
- -One (1) global swab of baton (SPD 0299)
- -One (1) global swab of baton (SPD 0299)
- -One (1) global swab of contact end of x26 taser, Serial #XOO-567570
- -One (1) global swab of contact end of x26 taser, Serial #XOO-567570
- -One (1) global swab of contact end of x26 taser, Serial #XOO-369068
- -One (1) global swab of contact end of x26 taser, Serial #XOO-369068

PHOTOGRAPHS

I took twenty-four (24) photographs of the following; which were uploaded into the Digital Crime Scene System (DCS):

Victim's clothing collected at Sutter

- -watch
- -change
- -jeans/belt
- -socks
- -lighter
- -boxer shorts
- -white belongings bag from Sutter (contained victim's clothing)

EVIDENCE

I packaged and booked the following items under PR#947709:

- -One (1) pair of white and grey socks
- -One (1) pair of black PD&C jeans with green canvas belt
- -One (1) pair of grey/black Hanes boxer shorts
- -One (1) Tommy Hilfiger men's watch
- -One (1) red Bic lighter collected from front left jeans pocket
- -US currency-coins \$.42-two (2) dimes, three (3) nickels, six (6) pennies collected from front left jeans pocket
- -One (1) white plastic belongings bag from Sutter

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Follow Up Report # SA 13

I cleared the call at approximately 2250 hours.

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GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Follow Up Report # SA 14

Follow Up Report # SA 14

Assignment Information

Assigned to: 572 - LINDNER, ROBERT 0538 Rank: POLICE OFFICER

Capacity: MAJOR CRIME SUPPLEMENT (FORENSICS/ID USE ONLY) Org unit: OOI FORENSIC ID -

CRIME SCENE INVESTIGATION

Assigned on: Apr-04-2017 (Tue.) 1110 by: 572 - LINDNER, ROBERT 0538

Report due on: Apr-19-2017 (Wed.)

Submission Information

Submitted on: Apr-07-2017 (Fri.) 1524

Checked by: 3617 - LOVITTO, KRISHA 6391

Approved on: May-10-2017 (Wed.) by: 3617 - LOVITTO, KRISHA 6391

Follow Up Conclusion Follow Up concluded: **Yes**

Narrative Text Report #1

Document: CSI REPORT

Author: **572 - LINDNER, ROBERT 0538** Related date/time: **Apr-04-2017 (Tue.) 1111**

On 3/6/17 at approximately 1517 hours, FI Behrens #6368 and I, CSI Ofc. Lindner #538 (FI24) arrived at 1201 Alhambra Blvd (Sutter Medical Group), to assist in the processing of a scene in regards to a use of force incident. Upon arrival, the scene was secured by patrol vehicles, uniformed officers, and yellow crime scene tape. The scene was processed under the direction of Detective Hunkapiller and Detective Robison.

PHOTOGRAPHS:

I took four hundred fifty one (451) photos of the following; which were uploaded to the Digital Crime Scene (DCS) system:

- Overall scene at 1201 Alhambra Blvd
 - Lobby area
 - Hallway leading to west exit

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Follow Up Report # SA 14

- Area in front of 1201 Alhambra Blvd
- Overall scene at parking lot of 1125 Alhambra Blvd. (Rite Aid)
- Overall appearance of Ofc. Dionne
 - Injury to back of left hand
 - Injury to left wrist
 - Injury to back of right hand
- Overall appearance of Ofc. Hight
 - Injury to right middle finger
 - Injury to back of right hand
- Overall appearance of Ofc. Paiz
 - Injury to right little finger
 - Injury to right shin
- Overall appearance of Ofc. Villegas
 - Injury to back of left hand
 - Injury to right knee
- Overall appearance of Ofc. Cunningham

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Follow Up Report # SA 14

- Overall appearance of Ofc. Harrison
- Overall appearance of Ofc. Spring

Overall and Close-up photos of all items of evidence; for detailed evidence list see evidence listed below.

EVIDENCE:

I collected, transported, packaged and booked the following items of evidence into the lockers at 555 Sequoia Pacific Blvd. The Sacramento Police Department's Property Section at approximately 2115 hours on 3/6/17 under PR#947699.

- Item#1 Black jacket hanging in tree in Rite Aid parking lot (1125 Alhambra Blvd.)
- Item#2 Numerous AFIDS (anti-felon identification) tags found on the floor in the hallway
- Item#3 CED (conductive energy device) dart with wire found in the floor in the hallway
- Item#4 CED cartridge blast door piece found in the floor in the hallway
- Item#5 CED cartridge blast door found in the floor in the hallway
- Item#6 CED cartridge blast door piece found in the floor in the hallway
- Item#7 CED cartridge blast door found in the floor in the hallway
- Item#8 Black jacket pieces, had been cut, found in the floor in the hallway
- Item#9 CED cartridge wire (no dart attached) found in the floor in the hallway
- Item#10 Pair (2) of shoes black/gray/white found in the floor in the hallway
- Item#11 CED cartridge (used) found in the floor in the hallway
- Item#12 CED dart with no attached wire found in the floor in the hallway
- Item#13 Black wallet with miscellaneous cards, including CA ID Card for J. Hernandez

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Follow Up Report # SA 14

- One (1) USB charger found in left front pocket of Item#1
- One (1) penny found in right front pocket of Item#1

DIAGRAM:

We took measurements of the scene and evidence. Diagrams will be completed upon request.

We cleared the scene at approximately 2046 hours.

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Follow Up Report # SA 15

Follow Up Report # SA 15

Assignment Information

Assigned to: **3399 - MOORE, STEPHEN 4079** Rank:

Capacity: SUPPLEMENTAL ADD (NOT FOR DETECTIVE USE) Org unit: OSS TRAINING ACADEMY/

ADMINISTRATION

Assigned on: Apr-06-2017 (Thu.) 1341 by: 3399 - MOORE, STEPHEN 4079

Report due on: Apr-13-2017 (Thu.)

Submission Information

Submitted on: Apr-06-2017 (Thu.) 1428

Approved on: Apr-07-2017 (Fri.) by: 3015 - KINNEY, BRIAN 3052

Follow Up Conclusion Follow Up concluded: **Yes**

Narrative Text Report #1

Document: 04 OBSERVATIONS

Author: 3399 - MOORE, STEPHEN 4079

Subject: SGT MOORE #3079

Related date/time: Apr-06-2017 (Thu.) 1416

On Monday, 4-3-17 I, Sgt Moore #3079, was contacted by detective Edward Macaulay requesting information on whether several officers had attended Crisis Intervention Training. I am currently assigned to the department's training unit as the academy and in-service training coordinator, and in this capacity I am responsible for, and have access to, department training records.

On 4-5-17 I conducted a records check of the POST database for training records on several SPD officers who had attended the 8 hour POST certified Crisis Intervention Training identified by POST course ID# 20801. My search yielded the following results:

Ofc I. Villegas attended 8-26-15

Ofc M. Hight attended 6-19-15

Ofc C. Dionne attended 8-31-16

Ofc Allison Cunningham attended 8-22-14

Ofc D. Paiz attended 5-8-15

Ofc C. Bohrer attended 12-18-15

Ofc J. Donnell attended 12-19-14

Ofc T. Pangelinan attended 4-6-15

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Ofc D. Southward attended 6-19-15

Ofc J. Warren attended 7-18-14

Ofc S. Womack attended 10-7-15

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Clearance Information

Agency: SACRAMENTO PD

Cleared status: SUSPENDED - OTHER - NOT APPLICABLE

Cleared on: **Nov-30-2017** (Thu.)

Cleared by Officer 1: 3569 - MACAULAY, EDWARD 3072 Org Unit: CHIEF - OOC EXECUTIVE AND SUPPORT STAFF

Approved by: 1076 - WERNER, BRADLEY D 7725

Org Unit: HOMIC - OOI MAJOR CRIMES - HOMICIDE

Complainant/Victim notified: No

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Related Property Report(s)

Report Information

Property Report #: 947699

Property case status: **SEIZED** (**EVIDENCE**)

Submitted on: Mar-06-2017 (Mon.) by: LINDNER, ROBERT 0538

Related:

Offense: GO SA 2017-64178

Related items: 15

Articles - Evidence

Status: **SEIZED** (**EVIDENCE**) Tag #: **SA947699-1**

Article: PJACKET- PERSONAL ACCESSORIES

Model: # of pieces: 1

Serial # 1: **UNKNOWN** OAN: Value: **\$0.00** Color:

Description: ITEM #1 BLACK JACKET HANGING IN TREE IN PLOT
Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947699- 2

Article: YMISCEL- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:

Description: ITEM #2 AFIDS TAGS (ANTI-FELON IDENTIFICATION) MULTIPLE TAGS

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947699- 3

Article: YMISCEL- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: ITEM #3 CED DART W/ WIRE

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947699- 4

Article: YMISCEL- MISCELLANEOUS

Model: # of pieces: 1

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GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:

Description: ITEM#4 CED CARTRIDGE BLAST DOOR PIECE

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947699- 5

Article: YMISCEL- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: ITEM#5 CED CARTRIDGE BLAST DOOR

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947699- 6

Article: YMISCEL- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: ITEM#6 CED CARTRIDGE BLAST DOOR PIECE

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: **SEIZED** (**EVIDENCE**) Tag #: **SA947699-7**

Article: YMISCEL- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:
Description: ITEM#7 CED CARTRIDGE BLAST DOOR

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947699- 8

Article: PJACKET- PERSONAL ACCESSORIES

Make:

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:

Value: \$0.00 Color: BLACK

Description: ITEM#8 BLACK JACKET (CUT)

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: **SEIZED** (**EVIDENCE**) Tag #: **SA947699- 9**

Article: YMISCEL- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: **UNKNOWN** OAN: Value: **\$0.00** Color:

Description: ITEM#9 CED CARTRIDGE WIRE (NO DART ATTACHED)

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947699- 10

Article: PSHOES- PERSONAL ACCESSORIES

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: ITEM #10 PAIR OF SHOES BLACK/GRAY/WHITE

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947699- 11

Article: YMISCEL- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: ITEM#11 CED CARTRIDGE (USED)

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947699- 12

Article: YMISCEL- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:
Description: ITEM#12 CED DART W/ NO ATTACHED WIRE

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

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SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947699- 13

Article: PWALLET- PERSONAL ACCESSORIES

Make:

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:

Value: \$0.00 Color: BLACK
Description: ITEM #13 BLACK WALLET W/ MISC CARDS,CA ID CARD J. HERNANDEZ

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947699- 14

Article: YMISCEL- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: USB CHARGER FROM LEFT FRONT POCKET OF ITEM #1 (JACKET)

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Securities - Evidence

Status: **SEIZED** (**EVIDENCE**)

Tag #: SA947699- 15

Type: CURRENCY, U.S./ CASH / MONEY

Denomination	Number	Value
\$1000		\$0.00
\$100		\$0.00
\$50		\$0.00
\$20		\$0.00
\$10		\$0.00
\$5		\$0.00
\$2		\$0.00
\$1		\$0.00
Half dollars		\$0.00
Quarters		\$0.00
Dimes		\$0.00
Nickels		\$0.00
Pennies		\$0.00

Denomination: **\$0.01**

Value: **\$0.01**

Country / Issuer: USA

Description: ONE (1) PENNY FROM RIGHT FRONT POCKET OF ITEM #1 (JACKET)

Recovered date: - Recovered value: \$0.00

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Flags: *e

Current Location: EP BL/06050301

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)

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SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Property Report(s)

Report Information

Property Report #: 955039

Property case status: **FORENSIC EVIDENCE** (**LATENT PRINTS ONLY**) Submitted on: **May-12-2017** (**Fri.**) by: **BEHRENS, REBECCA 6368**

Related:

Offense: GO SA 2017-64178

Related items: 1 **Articles - Evidence**

Status: FORENSIC EVIDENCE (LATENT PRINTS Tag #: SA955039-1

ONLY)

Article: DTHUMBD- DATA PROCESSING EQUIPMENT

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:
Description: FLASH DRIVE WITH CSI SCENE DIAGRAMS

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: LOCATED IN CSI HOMICIDE DIAGRAMS FILE CAB-LARGE STORAGE ROOM

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Related Property Report(s)

Report Information

Property Report #: 949326

Property case status: **SEIZED** (**EVIDENCE**)

Submitted on: Mar-06-2017 (Mon.) by: MACAULAY, EDWARD 3072

Related:

Offense: GO SA 2017-64178

Location: 1201 ALHAMBRA BLVD

Municipality: SACRAMENTO County: SACRAMENTO COUNTY

District: 6 Zone: 6D Related items: 8

Articles - Evidence

Status: **SEIZED** (**EVIDENCE**) Tag #: **SA949326-8**

Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: MEDICAL RECORDS AS OF 4/12/17

Recovered value: \$0.00 Recovered date: -

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: **SEIZED** (**EVIDENCE**) Tag #: SA949326- 1

Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: OFC. VILLEGAS INTERVIEW

Recovered date: -Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY DAVID DUNLEAVY

Articles - Evidence

Tag #: SA949326- 2 Status: **SEIZED** (**EVIDENCE**)

Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color: Description: VIDEO FROM RITE AID 1125 ALHAMBRA BLVD

Recovered date: -Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY NORMA FLORENDO

Articles - Evidence

Status: **SEIZED** (**EVIDENCE**) Tag #: SA949326-3 Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: UNKNOWN OAN:

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Value: \$0.00 Color:

Description: **DISPATCH AUDIO FROM SPD**

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY NORMA FLORENDO

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA949326- 4

Article: IDOCUME- ITEMS OF IDENTIFICATION

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: MEDICAL RECORDS AS OF 3/6/17

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA949326- 5

Article: RVTAPE- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: **UNKNOWN**Value: **\$0.00**Color:

Description: RITE AID SURVIELLANCE

Recovered date: - Recovered value: \$0.00

Flags: d *e

Current Location: (Disposed)

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA949326- 6

Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: **UNKNOWN** OAN: Value: **\$0.00** Color:

Description: FIRE DISPATCH AUDIO

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY DAVID DUNLEAVY

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA949326-7

Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: AUDIO OF PHONCE CALLS WITH

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY DAVID DUNLEAVY

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Property Report(s)

Report Information

Property Report #: 947749

Property case status: **SEIZED** (**EVIDENCE**)

Submitted on: Mar-07-2017 (Tue.) by: ROBISON, BRAD 0414

Related:

Offense: GO SA 2017-64178

Related items: 2

Articles - Evidence

Status: **SEIZED** (**EVIDENCE**) Tag #: **SA947749-1**

Article: YPAPER- MISCELLANEOUS

Serial # 1: **UNKNOWN** OAN: Value: **\$0.00** Color:

Description: SCENE LOG

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY DAVID DUNLEAVY

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947749- 2
Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: **UNKNOWN** OAN: Value: **\$0.00** Color:

Description: **INTERVIEW OF**

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY DAVID DUNLEAVY

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)

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SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Property Report(s)

Report Information

Property Report #: 948003

Property case status: **SEIZED** (**EVIDENCE**)

Submitted on: Mar-09-2017 (Thu.) by: PUTMAN, DAVID 0870

Related:

Offense: GO SA 2017-64178

Related items: 1

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA948003- 1
Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: **OFC SPRING INTERVIEW**

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY DAVID DUNLEAVY

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)

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SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Related Property Report(s)

Report Information

Property Report #: 947777

Property case status: **SEIZED** (**EVIDENCE**)

Submitted on: Mar-07-2017 (Tue.) by: GRIGGS, JEFFREY 0670

Related:

Offense: GO SA 2017-64178

Related items: 4

Articles - Evidence

Status: **SEIZED** (**EVIDENCE**) Tag #: **SA947777-1**

Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:

Description: **OFC HIGHT INTERVIEW AND PHOTO OF SUSPECT SHOWN**Recovered date: **Recovered value: \$0.00**

Flags: *e

Current Location: CITY ATTORNEY DAVID DUNLEAVY

Articles - Evidence

Status: **SEIZED** (**EVIDENCE**) Tag #: **SA947777- 2**

Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: OFC PIAZ INTERVIEW

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY DAVID DUNLEAVY

Articles - Evidence

Status: **SEIZED** (**EVIDENCE**) Tag #: **SA947777- 4**

Article: **DCIRCUI- DATA PROCESSING EQUIPMENT**Serial # 1: **UNKNOWN**Value: **\$0.00**Color:

Description: SURV VIDEO FROM 1201 ALHAMBRA

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY NORMA FLORENDO

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947777- 3

Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:
Description: PHONE CALL 3-7-17

Recovered date: - Recovered value: \$0.00

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Flags: *e

Current Location: CITY ATTORNEY DAVID DUNLEAVY

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)

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SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED 4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Property Report(s)

Report Information

Property Report #: 948001

Property case status: **SEIZED** (**EVIDENCE**)

Submitted on: Mar-09-2017 (Thu.) by: ROBISON, BRAD 0414

Related:

Offense: GO SA 2017-64178

Related items: 2

Articles - Evidence

Status: **SEIZED** (**EVIDENCE**) Tag #: **SA948001-1** Article: **RCDISC- RADIO**, **TV**, **AND SOUND ENTERTAINMENT DEVICES**

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:

Description: INTERVIEW OF

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY DAVID DUNLEAVY

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA948001- 2

Article: **DCIRCUI- DATA PROCESSING EQUIPMENT**Serial # 1: **UNKNOWN**Value: **\$0.00**Color:

Description: THUMB DRIVE WITH SCENE VIDEO

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY NORMA FLORENDO

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)

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SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Related Property Report(s)

Report Information

Property Report #: 947774

Property case status: **SEIZED** (**EVIDENCE**)

Submitted on: Mar-07-2017 (Tue.) by: AYERS, SHAWN E 3002

Related:

Offense: GO SA 2017-64178

Related items: 2

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947774- 1

Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:
Description: INTERVIEW: OFC DIONNE #395 (3-06-17)

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY DAVID DUNLEAVY

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947774- 2

Article: YINVPHO- MISCELLANEOUS

Model: # of pieces: 2

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:

Description: **PHOTOS SHOWN TO OFC DIONNE DURING INTERVIEW**Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)

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SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Related Property Report(s)

Report Information

Property Report #: 947706

Property case status: **SEIZED** (**EVIDENCE**)

Submitted on: Mar-06-2017 (Mon.) by: ROSSI, STACI 6379 (

Related:

Offense: GO SA 2017-64178

Location: 5770 FREEPORT BLVD Apartment: 100

Municipality: SACRAMENTO County: SACRAMENTO COUNTY

District: 4 Zone: 4C Related items: 9

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947706- 1

Article: YTASER- MISCELLANEOUS

Make: TASER

Model: **X26** # of pieces: **1**

Serial # 1: **X00215980** OAN:

Value: \$0.00 Color: YELLOW

Description: YELLOW/BLK X26 TASER-X00-215980 - SPD PROPERTY

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947706- 2

Article: YSAMPLE- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:
Description: GLOBAL SWAB OF X26 TASER-XOO-215980

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947706- 3

Article: YSAMPLE- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:
Description: GLOBAL SWAB OF X26 TASER-XOO-215980

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947706- 4

Article: YSAMPLE- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: GLOBAL SWAB OF BATON (SPD 0299)

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947706- 5

Article: YSAMPLE- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: **UNKNOWN** OAN: Value: **\$0.00** Color:

Description: GLOBAL SWAB OF BATON (SPD 0299)

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947706- 6

Article: YSAMPLE- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:
Description: GLOBAL SWAB OF X26 TASER-XOO-567570

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: **SEIZED (EVIDENCE)** Tag #: **SA947706-7**

Article: YSAMPLE- MISCELLANEOUS

Model: # of pieces: 1
Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:
Description: GLOBAL SWAB OF X26 TASER-XOO-567570

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947706- 8

Article: YSAMPLE- MISCELLANEOUS

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:
Description: GLOBAL SWAB OF X26 TASER-XOO-369068

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947706- 9

Article: YSAMPLE- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:
Description: GLOBAL SWAB OF X26 TASER-XOO-369068

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)

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SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Related Property Report(s)

Report Information

Property Report #: 947709

Property case status: **SEIZED** (**EVIDENCE**)

Submitted on: Mar-06-2017 (Mon.) by: ROSSI, STACI 6379 (

Related:

Offense: GO SA 2017-64178

Location: 2801 L ST

Municipality: SACRAMENTO County: SACRAMENTO COUNTY

District: 3 Zone: 3B Related items: 7

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947709- 1

Article: PHOSIER- PERSONAL ACCESSORIES

Model: # of pieces: 2

Serial # 1: **UNKNOWN** OAN: Value: **\$0.00** Color:

Description: PAIR OF WHITE AND GREY SOCKS

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947709- 2

Article: **PPANTS- PERSONAL ACCESSORIES**

Model: # of pieces: 2

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color:

Description: PAIR OF BLK PD&C JEANS WITH GREEN CANVAS BELT Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947709- 3

Article: PUNDERW- PERSONAL ACCESSORIES

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:
Description: PAIR OF GREY/BLK HANES BOXER SHORTS

Recovered date: - Recovered value: **\$0.00**

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Status: **SEIZED** (**EVIDENCE**) Tag #: **SA947709-5**

Article: PLIGHTE- PERSONAL ACCESSORIES

Model: # of pieces: 1
Serial # 1: UNKNOWN OAN:
Value: \$0.00 Color:

Description: **RED BIC LIGHTER FROM FRONT LEFT JEANS POCKET**Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA947709- 7

Article: YBAG- MISCELLANEOUS

Model: # of pieces: 1

Serial # 1: **UNKNOWN** OAN: Value: **\$0.00** Color:

Description: WHITE PLASTIC BELONGINGS BAG FROM SUTTER

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Securities - Evidence

Status: **SEIZED** (**EVIDENCE**)

Tag #: **SA947709-6**

Type: CURRENCY, U.S./ CASH / MONEY

Denomination	Number	Value
\$1000		\$0.00
\$100		\$0.00
\$50		\$0.00
\$20		\$0.00
\$10		\$0.00
\$5		\$0.00
\$2		\$0.00
\$1		\$0.00
Half dollars		\$0.00
Quarters		\$0.00
Dimes		\$0.00
Nickels		\$0.00
Pennies		\$0.00

Denomination: \$0.42

Value: **\$0.00**

Country / Issuer: **US** Serial # 1: **UNKNOWN**

Description: 2-DIMES, 3-NICKELS,6-PENNIES=.42

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Jewelry - Evidence

Status: **SEIZED** (**EVIDENCE**)

Tag #: SA947709- 4 Article: WATCH Gender: MEN'S # of pieces: 1 Value: **\$0.00** Color:

Description: TOMMY HILFIGER MENS WATCH

Recovered date: -Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)

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PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Related Property Report(s)

Report Information

Property Report #: 948810

Property case status: **SEIZED** (**EVIDENCE**)

Submitted on: Mar-06-2017 (Mon.) by: ENGLEFIELD, ASHLEY 0563 (

Related:

Offense: GO SA 2017-64178

Related items: 2

Articles - Evidence

Status: **SEIZED** (**EVIDENCE**) Tag #: SA948810-1

Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: UNKNOWN OAN: Value: \$0.00 Color: Description: OFFICER CUNNINGHAM STATEMENT VIDEO

Recovered date: -Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY DAVID DUNLEAVY

Articles - Evidence

Status: **SEIZED** (**EVIDENCE**) Tag #: SA948810- 2

Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Serial # 1: UNKNOWN OAN: Value: **\$0.00** Color:

Description: OFFICER HARRISON STATEMENT

Recovered date: -Recovered value: \$0.00

Flags: *e

Current Location: CITY ATTORNEY DAVID DUNLEAVY

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)

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SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

Related Property Report(s)

Report Information

Property Report #: 968255

Property case status: **SEIZED** (**EVIDENCE**)

Submitted on: Sep-07-2017 (Thu.) by: CRIME LAB EVIDENCE (E&P use Only)

Related:

Offense: GO SA 2017-64178

Related items: 1

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA968255- 1

Article: YBLOOD- MISCELLANEOUS

Serial # 1: **UNKNOWN** OAN: Value: **\$0.00** Color:

Description: **BLOOD SAMPLE FOR HERNANDEZ**

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BU/11011802

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)

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SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

REQUESTED

Related Property Report(s)

Report Information

Property Report #: 999047

Property case status: SEIZED (EVIDENCE)

Submitted on: Jun-18-2018 (Mon.) by: SHIRAISHI, JEFFREY 3093

Related:

Offense: GO SA 2017-64178

Related items: 2

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA999047- 1
Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Make:

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:

Value: \$0.00 Color: MULTI-COLORED-USED W/ COL (MUL/COL)

Description: INTERVIEW

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Articles - Evidence

Status: SEIZED (EVIDENCE) Tag #: SA999047- 2
Article: RCDISC- RADIO, TV, AND SOUND ENTERTAINMENT DEVICES

Make:

Model: # of pieces: 1

Serial # 1: UNKNOWN OAN:

Value: \$0.00 Color: MULTI-COLORED-USED W/ COL (MUL/COL)

Description: INTERVIEW

Recovered date: - Recovered value: \$0.00

Flags: *e

Current Location: EP BL/06050301

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)

For: 4008 Printed On: Oct-04-2019 (Fri.) Page 1223 of 1224

SACRAMENTO POLICE DEPARTMENT

PUBLIC HARDCOPY

RELEASED PER PUBLIC RECORDS ACT REQUEST

GO# SA 2017-64178 SUSPENDED-WARRANT REQUESTED

4801-5 69 PC RESIST/OBSTRCT EXEC OFC

*** END OF HARDCOPY ***

For: 4008 Printed On: Oct-04-2019 (Fri.) Page 1224 of 1224



DANIEL HAHN Chief of Police

5770 Freeport Blvd., Suite 100 Sacramento, CA 95822-3516

(916) 808-0800 Fax: (916) 808-0818 www.sacpd.org

Report Number: 2017-064178

Please note that the records provided in this release do not include records or portions of records that are exempt from disclosure pursuant to applicable law. Without limiting other arguments against disclosure that may exist, the following records or portions of records are specifically prohibited or exempted from disclosure:

Records or information that constitutes the personal data or information of an officer or their family members (Cal. Pen. Code $\S\S 832.7(b)(5)$ and (b)(6)(A));

Records or information, the disclosure of which would compromise the anonymity of whistleblowers, complainants, victims or witnesses (Cal. Pen. Code § 832.7(b)(6)(B));

Records or information, the disclosure of which would constitute an unwarranted invasion of personal privacy (Cal. Gov. Code § 7927.700; see also City of San Jose v. Superior Court (1999) 74 Cal.App.4th 1008);

Records or information, the disclosure of which would reveal personal identifying information, where, on the facts of the particular case, the public interest served by not disclosing the information clearly outweighs the public interest served by disclosure of the information (Cal. Pen. Code § 832.7(b)(7));

Records or information wherein the public interest served by not disclosing the record clearly outweighs the public interest served by disclosure (Cal. Gov. Code § 7922.000); and

Records or information, the disclosure of which is exempted or prohibited pursuant to federal or state law (Cal. Gov. Code § 6254(k); see also: Cal. Const. art. 1 Sec. 1; Cal. Pen. Code § 15150 et seq.; Cal. Pen. Code §§ 11105 and 13300; and HIPAA 45 CFR Part 160 and Subparts A and E of Part 164)

Sacramento Police Department Professional Standards Unit 916-808-3790 spdpsu@pd.cityofsacramento.org