



U.S. Immigration and Customs Enforcement (ICE) Detainee Death Report: REYES-Clemente, Abel

General Demographic/Background Information

- **Date of Birth:** August 5, 1964
- **Date of Death:** April 3, 2019
- **Age:** 54
- **Sex:** Male
- **Country of Citizenship:** Mexico
- **Marital Status:** Single
- **Children:** One son

Immigration History

- Mr. REYES-Clemente told a Deportation Officer during a January 14, 2019 interview that he entered the U.S. illegally on an unknown date, approximately nineteen (19) years ago via Nogales, Arizona.
- On December 28 and 29, 1999, January 3, 2000, June 23, 2008, and July 7, 2008, Mr. REYES-Clemente was encountered by DHS personnel and granted voluntary return to Mexico.
- On February 26, 2019, the Lower Buckeye Jail, in Maricopa County, AZ, released Mr. REYES-Clemente to ICE Enforcement and Removal Operations (ERO) Phoenix's custody. ERO Phoenix served him with a Notice to Appear, Form I-862, and transferred him to the Florence Staging Facility in Florence, AZ.
- On March 1, 2019, ERO Phoenix transferred Mr. REYES-Clemente to the Florence Service Processing Center (FSPC).

Criminal History

- June 12, 2008 - Arrested for outstanding warrants on Assault-Intent/Reckless/Injure (A.R.S. Section 13-1203A1), Disorderly Conduct-Fighting (A.R.S. Section 13-2904A1), and Prevent/Interfere Tele-Emerg (A.R.S. Section 13-2915A3).
- September 19, 2017 - Convicted of Driving Under Influence of Liquor

Medical History

- **On February 27, 2019**, a registered nurse (RN) documented the pre-screening of Mr. REYES-Clemente. Mr. REYES-Clemente reported a three-year history of Type 2 diabetes mellitus. The RN measured Mr. REYES-Clemente's blood sugar at 144. The RN obtained a telephone order from an advanced practice provider (APP) to initiate metformin 500 mg, per os (PO, aka orally), bis in die (BID, aka twice a day), obtain BID blood sugars, and to notify an APP if any blood sugar reading was over 400. Mr. REYES-Clemente's chest x-ray was negative.
- **On February 28, 2019**, an APP completed Mr. REYES-Clemente's physical exam. The exam was normal, except for ptterygium (a non-cancerous growth of the eye). The APP diagnosed Type 2 diabetes mellitus, restless leg syndrome (RLS), and tinea unguium (toenail fungal infection). The APP ordered baseline laboratory tests; prescribed metformin 500 mg, PO, BID, to keep on person (KOP), and gabapentin 200 mg, PO, daily, KOP to treat RLS; and noted treatment of the tinea unguium would be considered after reviewing the laboratory results. The APP provided education to Mr. REYES-Clemente and scheduled him for a one-week follow-up.



- **On March 7, 2019,** an APP evaluated Mr. REYES-Clemente, who voiced that the gabapentin was not relieving his RLS. The physical exam was normal. The results of the baseline laboratory tests were reviewed with the following abnormalities noted: creatinine was low at 0.59 (normal range of 0.76 – 1.27), potassium was low at 3.4 (normal range of 3.5 – 5.2), alkaline phosphatase was high at 153 (normal range of 39 – 117), red blood cell count was low at 4.11 (normal range of 4.14 – 5.80), hematocrit was low at 37.4 (normal range of 37.5 – 51.0), and hemoglobin A1c was high at 6.1 (normal range of 4.8 – 5.6). The APP increased the gabapentin dosage to 400 mg, PO, daily; prescribed a daily aspirin, KOP; and scheduled Mr. REYES-Clemente for a four-week follow-up.
- **On March 17, 2019,** an RN advised an APP that Mr. REYES-Clemente refused his blood sugar finger stick.
- **On March 20, 2019,** ERO transferred Mr. REYES-Clemente to LPCC. At LPCC, an RN completed Mr. REYES-Clemente's intake screening. All findings were consistent with those noted at FSPC and his medications were continued. The RN cleared Mr. REYES-Clemente to work in food services and made a routine referral to mental health and dental services. The next day, ERO transferred Mr. REYES-Clemente back to FSPC.
- **On March 25, 2019,** an APP completed Mr. REYES-Clemente's physical exam visit. The APP did not perform a physical exam, noting one had been completed within the last 90 days. All medications and treatments were continued, and annual follow-up appointments were scheduled. No other treatment was provided.
- **On March 29, 2019,** the order to measure Mr. REYES-Clemente's blood sugar BID expired and was not renewed.
- **On March 30, 2019,** a housing unit officer escorted Mr. REYES-Clemente to the medical department, because he was in possession of a bottle of expired metformin. The officer was concerned he may not have been taking his medication as prescribed. Mr. REYES-Clemente was also in possession of a current prescription of metformin. An RN interviewed Mr. REYES-Clemente and determined he was taking his medication as prescribed.
- **On April 1, 2019,** an APP evaluated Mr. REYES-Clemente for complaints of fever, chills, sore throat, and mild cough that began two nights prior. The APP noted a temperature of 100.1, a heartrate of 114, and a pulse oximetry reading (level of oxygen in arterial blood) of 96% (normal range of 95 – 100). The APP noted Mr. REYES-Clemente appeared ill and had the symptoms described. The remainder of the physical exam was normal. The APP diagnosed influenza (flu) and prescribed oseltamivir (antiviral) 75 mg, PO, BID, for the flu, and acetaminophen 650 mg, PO, four times daily, as needed for pain and fever. The APP provided education and planned to see Mr. REYES-Clemente again for his scheduled appointment on April 4, 2019. Later that same day, at 5:23 p.m., the APP ordered that Mr. REYES-Clemente be housed in medical segregation with daily nursing checks.
- **On April 2, 2019,** an RN noted Mr. REYES-Clemente needed assistance to sit up in bed, took his medicines as prescribed, and was encouraged to hydrate and eat throughout the day. His temperature was 100.0. A physical exam was not documented.
 - At 12:15 p.m., an RN completed nursing rounds on Mr. REYES-Clemente, noting a normal physical exam, except a heartrate of 103 and a pulse oximetry reading of 83%. A security officer informed the RN that Mr. REYES-Clemente had been lying in bed all day. The RN encouraged Mr. REYES-Clemente to be more active and educated him on hydration.



- At 2:56 p.m., the RN advised an APP that Mr. REYES-Clemente's pulse oximetry readings ranged from 79–83%, and his heartrate ranged from 103–110. The RN noted Mr. REYES-Clemente was ambulatory in his cell and had no complaints other than knee pain after ambulating. The RN documented a concern that Mr. REYES-Clemente may not have been taking his medications as prescribed, because he was in possession of expired prescriptions for metformin and aspirin.

Synopsis of Death

- **On April 3, 2019, at 4:36 a.m.**, an RN completed nursing rounds on Mr. REYES-Clemente, noting he sat up for the assessment, his heart rate was 100, temperature was 98.6, and pulse oximetry reading was 94%. The RN also noted he refused to take his morning medications.
 - At 6:12 a.m., the segregation housing officer called the medical department for someone to respond, because Mr. REYES-Clemente was having difficulty breathing. While medical staff were en route, a medical emergency was announced, and security staff initiated cardiopulmonary resuscitation (CPR) on Mr. REYES-Clemente as he laid in bed. When the medical staff arrived, Mr. REYES-Clemente was transferred from his bed to the floor. Emergency medical services (EMS) were called. An RN noted Mr. REYES-Clemente was unconscious, unresponsive to any stimuli, had a weak, thready pulse, and that the pulse oximeter could not detect a reading. CPR was continued. Automatic external defibrillator (AED) electrodes were applied to Mr. REYES-Clemente, but the AED advised no shock. CPR was continued. Additional medical personnel and equipment arrived. A RN used suction equipment to remove secretions from Mr. REYES-Clemente's oral airway.
 - At 6:24 a.m., EMS personnel arrived, assumed care of Mr. REYES-Clemente, and continued CPR. The EMT noted Mr. REYES-Clemente was pulseless, had no spontaneous respiration, the back of his right leg and the back of his chest were discolored and appeared to have lividity (the settling of blood into the lowest blood vessels, after death, resulting in the skin being discolored). The electrocardiogram indicated Mr. REYES-Clemente did not have a heartbeat. The EMT reported his findings to a medical doctor (MD) overseeing EMS actions.
 - At 6:33 a.m., the MD pronounced Mr. REYES-Clemente dead.
- On April 29, 2019, the Pinal County Forensic Chief Medical Examiner documented the cause of death as complications of liver cirrhosis, diabetes mellitus, and hypertensive cardiovascular disease, and the manner of death was natural.