



**U.S. Immigration and Customs Enforcement (ICE)
Detainee Death Report: Jhon Benavides QUINTANA**

General Demographic/Background Information

- **Date of Birth:** June 28, 1991
- **Date of Death:** June 15, 2024
- **Age:** 32
- **Gender:** Male
- **Country of Citizenship:** Ecuador
- **Marital Status:** N/A
- **Children:** N/A

Immigration History

On March 21, 2024, U.S. Border Patrol agents (USBP) arrested Mr. QUINTANA, at El Paso, Texas (TX), upon his illegal entry into the United States. USBP served Mr. QUINTANA a Notice and Order of Expedited Removal, Form I-860, pursuant to Section 235(b) of the Immigration and Nationality Act (INA).

On March 24, 2024, USBP transferred Mr. QUINTANA to ICE Enforcement and Removal Operations (ERO) custody, and ERO detained Mr. QUINTANA at Otero County Processing Center (OCPC), located in Chaparral, NM.

Synopsis of Events

On March 24, 2024, a registered nurse (RN) completed Mr. QUINTANA's intake screening and documented history of surgical repair to a left inguinal vein in 2022, current use of low dose aspirin (blood thinner), denial of any mental health history, and normal vital signs. The RN cleared him for general population.

On March 25, 2024, an advanced practice provider (APP) completed Mr. QUINTANA's initial physical exam and documented reported history of a left groin stab injury, an abdominal aneurysm, requiring hospitalization and surgical correction in 2022, and a permanent surgically implanted blood clot filter in his left inguinal vein, requiring a daily low dose of aspirin (blood thinner). The APP noted a normal exam and vital signs, and healed midline abdominal and left inner groin scars, ordered aspirin 81 milligrams (mg) tablet, daily, baseline labs, and an electrocardiogram, and cleared him for general population.

On March 29, 2024, ERO transferred Mr. QUINTANA to the Texas Department of Public Safety (DPS) custody. On the same date, DPS detained Mr. QUINTANA at El Paso County Sheriff's Detention Facility (EPCSDF), located in El Paso, TX.

On May 10, 2024, EPCSDF transferred Mr. QUINTANA to ERO custody, and ERO detained him at OCPC. Mr. QUINTANA's EPCSDF transfer summary only listed his current use of aspirin, ibuprofen (pain medicine), and hydrocortisone topical cream (treats itchy skin). An OCPC licensed



vocational nurse completed Mr. QUINTANA's intake screening and documented his reported current use of low dose aspirin daily, and a surgical history of a left femoral artery and vein repair from 2022.

- **On the same date**, an APP completed Mr. QUINTANA's initial physical exam, documented his request for a dental evaluation due to a cracked tooth, informed him of his lab results from March 2024 (no abnormal findings), and noted his report of an abdominal aneurysm he developed secondary to a femoral artery stab wound from 2022. The APP noted a normal exam and vital signs and referred Mr. QUINTANA to a dentist per his request.

On May 14, 2024, a dentist evaluated Mr. QUINTANA for a complaint of a toothache, documented non-restorable gross decay on tooth number 4, and recommended pain medicine and extraction of the affected tooth.

On May 15, 2024, an RN evaluated Mr. QUINTANA for complaints of right finger pain with bruising, using a nursing protocol for musculoskeletal pain, and documented a normal exam and vital signs, and Mr. QUINTANA's report of "blood circulation issues."

On May 22, 2024, an APP evaluated Mr. QUINTANA for complaints of numbness and tingling in his left lower leg, coupled with a painful pulsating left groin mass. The APP noted Mr. QUINTANA reported two years prior to his detention, he developed a fistula and abdominal aneurysm from a stab injury, surgically repaired in 2022, and had a surgically implanted blood clot filter in his left groin. The APP documented normal vital signs, healed midline abdominal and left inner groin scars without any palpable mass or swelling and ordered an ultrasound (scheduled for June 17, 2024) of the abdomen and pelvis and gabapentin (treats numbness and tingling associated with nerve damage) 300 mg by mouth, twice daily.

On June 15, 2024, at approximately 7:33 a.m., a kitchen supervisor announced a medical emergency in the kitchen.

- **At approximately 7:35 a.m.**, health staff responded to the emergency with a gurney, and discovered Mr. QUINTANA lying on his right side and shaking on the floor with blood escaping from the sides of his mouth. Health staff transferred Mr. QUINTANA from the floor onto the gurney and transported him to the medical urgent care room. Health staff noted Mr. QUINTANA continued shaking and had labored breathing in transit.
- **At approximately 7:45 a.m.**, upon arrival to the urgent care room, health staff noted Mr. QUINTANA was unresponsive, not breathing, and had no pulse.
- **At approximately 7:46 a.m.**, responding health staff initiated cardiopulmonary resuscitation (CPR), attached an automated external defibrillator on Mr. QUINTANA's chest (no shock advised), and requested emergency medical services (EMS) via 911.



- **At approximately 7:55 a.m.**, health staff secured a 20-gauge antecubital intravenous catheter on Mr. QUINTANA's right arm, administered a liter of normal saline, and continued CPR.
- **At approximately 8:12 a.m.**, EMS personnel arrived at the scene, assumed Mr. QUINTANA's care, and continued resuscitative efforts.
- **At approximately 8:34 a.m.**, an OCPC physician declared Mr. QUINTANA deceased.