



## U.S. Immigration and Customs Enforcement (ICE) Detainee Death Report: Genry RUIZ Guillen

### General Demographic/Background Information

- **Date of Birth:** November 10, 1995
- **Date of Death:** January 23, 2025
- **Age:** 29
- **Gender:** Male
- **Country of Citizenship:** Honduras
- **Marital Status:** N/A
- **Children:** N/A

### Immigration History

**On June 18, 2023**, the United States (U.S.) Border Patrol (BP) arrested Mr. RUIZ Guillen near Eagle Pass, Texas, upon his illegal entry into the United States and placed him in expedited removal proceedings.

**On June 21, 2023**, Mr. RUIZ Guillen was transferred to U.S. Immigration and Customs Enforcement (ICE) custody at IAH Polk Adult Detention Facility, in Livingston, TX.

**On July 14, 2023**, ICE paroled Mr. RUIZ Guillen from custody.

**On June 19, 2024**, ICE ERO encountered Mr. RUIZ Guillen at Hillsborough County Jail (HCJ), in Tampa, FL, and lodged an Immigration Detainer - Notice of Action, Form I-247A.

**On October 29, 2024**, Mr. RUIZ Guillen was released from HCJ to ICE custody at Pinellas County Jail, in Clearwater, FL.

**On October 30, 2024**, ICE transferred Mr. RUIZ Guillen to Krome Service Processing Center (KSPC), in Miami, Florida.

### Criminal History

**On June 2, 2024**, Mr. RUIZ Guillen was arrested by Hillsborough County Sheriff's Office in Florida for domestic violence.

### Synopsis of Events

**On October 30 and 31, 2024**, a registered nurse (RN) completed Mr. RUIZ Guillen's preliminary and primary medical intake screenings in his native language (Spanish), documented no abnormalities or medical issues, and cleared him for general population (GP). Mr. RUIZ Guillen's HCJ transfer summary showed no medical issues identified while in HCJ custody.

**On November 5, 2024**, custody staff called a medical emergency in Mr. RUIZ Guillen's dorm, and the responding advanced practice provider (APP) noted finding Mr. RUIZ Guillen sitting on his



bed, alert and oriented, and in no distress. The APP documented slightly elevated blood pressures and heart rate. Mr. RUIZ Guillen denied any head injury but reported dizziness.

- **On the same date**, the APP re-evaluated Mr. RUIZ Guillen, documented normal vital signs and electrocardiogram with no ischemic changes, ordered BP checks for three days, instructed Mr. RUIZ Guillen to return to the medical clinic if symptoms persisted, and cleared him for GP.

**On November 6, 2024**, an APP completed Mr. RUIZ Guillen's initial physical exam and documented his denial of any mental health or medical history, except his reported history of dizziness. The APP diagnosed Mr. RUIZ Guillen with non-specific dizziness, ordered routine labs, and medication to treat dizziness. The APP offered him a wheelchair and an overnight stay in the medical housing unit (MHU) for monitoring; however, Mr. RUIZ Guillen declined both and returned to GP.

**Between November 7 and 8, 2024**, RNs checked Mr. RUIZ Guillen's BP and documented normal findings.

**On November 9, 2024**, custody staff called a medical emergency in Mr. RUIZ Guillen's dorm, and an RN documented finding Mr. RUIZ Guillen lying on his bed, complaining of dizziness. The RN noted Mr. RUIZ Guillen's denial of head injury, nausea, vomiting, or blurred vision, and an APP ordered a nursing reassessment and medication for vertigo with three cups of water. After 25 minutes, an RN re-evaluated Mr. RUIZ Guillen and documented his report of feeling better.

**On November 11, 2024**, an APP referred Mr. RUIZ Guillen to the local emergency room (ER) for further evaluation for complaints of dizziness.

**On November 12, 2024**, an RN completed Mr. RUIZ Guillen's ER return assessment, noted his diagnoses of syncope, dizziness, and headache, documented normal vital signs, and notified the APP who cleared Mr. RUIZ Guillen for GP.

- **Later on the same date**, an RN evaluated Mr. RUIZ Guillen for his complaint of dizziness, documented normal vital signs, and consulted with the APP who ordered medication to treat his dizziness and instructed the RN to monitor Mr. RUIZ Guillen in the medical clinic for 30 minutes and to schedule a next-day provider appointment. After reassessing Mr. RUIZ Guillen, the RN documented normal vital signs, advised him to increase his fluid intake, and cleared him for GP.

**On November 13, 2024**, an APP completed Mr. RUIZ Guillen's follow-up evaluation, documented his report of a headache, prescribed medication, and referred Mr. RUIZ Guillen to a cardiologist and neurologist, per the ER physician's recommendation.

**Between November 18 and 24, 2024**, health staff evaluated Mr. RUIZ Guillen for dizziness complaints with normal findings.

**On November 25, 2024**, an RN evaluated Mr. RUIZ Guillen after he fell in his room, and an APP referred Mr. RUIZ Guillen to the ER via ambulance for further evaluation.



**On November 26, 2024**, an RN completed Mr. RUIZ Guillen’s ER return assessment, documented normal vital signs, and an APP ordered a lower bunk pass and a next-day, provider follow-up appointment.

**On November 27, 2024**, after another fall in his room, the APP admitted Mr. RUIZ Guillen to the MHU for observation.

- **On the same date**, Mr. RUIZ Guillen’s had multiple seizures, and a physician referred him to the ER via ambulance.

**On November 28, 2024**, an RN completed Mr. RUIZ Guillen’s ER return assessment, documented normal vital signs, and an APP admitted Mr. RUIZ Guillen to the MHU with a next-day provider follow-up appointment.

**On November 29, 2024**, an APP completed Mr. RUIZ Guillen’s follow-up evaluation, documented his report of ongoing dizziness, ordered an electroencephalogram (EEG) and magnetic resonance imaging (MRI) of the brain, and prescribed seizure medication.

- **On the same date, at approximately 12:43 p.m.**, a psychiatrist evaluated Mr. RUIZ Guillen at the request of an APP and nursing staff for signs of confusion, and diagnosed him with unspecified psychosis, prescribed medications, and scheduled a one-week follow up.

**Between November 29 and 30, 2024**, during MHU rounds, nursing staff noted Mr. RUIZ Guillen did not experience any seizures but displayed disorientation, bizarre behavior, and attempts to leave his cell. As a result, nursing staff referred him to an APP.

**On December 1, 2024**, an APP documented observing seizures and referred Mr. RUIZ Guillen to the ER for further evaluation while keeping him on his right side to maintain an open airway, administering oxygen. and two doses of seizure medication intramuscularly while monitoring him.

- **At approximately 9:36 a.m.**, EMS personnel arrived at KSPC in response to a 911 call and assumed Mr. RUIZ Guillen’s care.
- **At approximately 9:45 a.m.**, EMS personnel transferred Mr. RUIZ Guillen to the ER.

**Between December 1 and 6, 2024**, Mr. RUIZ Guillen’s hospital EEG result showed epileptic seizure activity.

**On December 7, 2024**, Mr. RUIZ Guillen’s hospital MRI result showed no acute finding. The attending physician discharged him with instructions to follow standard seizure protocols for at least six months until he receives neurology clearance.

- **On the same date**, a KSPC RN documented normal vital signs and obtained orders from the APP to admit Mr. RUIZ Guillen to the MHU and administer medication.



**On December 8, 2024**, an APP completed Mr. RUIZ Guillen’s off-site return evaluation and documented poor communication and denial of distress. The provider prescribed seizure medication and scheduled an off-site neurology appointment for December 27, 2024.

- **On the same date**, an RN documented observing Mr. RUIZ Guillen’s disorientation and confusion without aggression and informed an APP, who ordered medication to treat his confusion.
- **At approximately 8:00 p.m.**, during MHU rounds, an RN documented finding Mr. RUIZ Guillen disorganized, confused, lying on the floor, refusing to sit or lie on his bed, soiled with feces. Mr. RUIZ Guillen showered, received a change of clothes, and transferred to a different room. The RN noted Mr. RUIZ Guillen laughed, talked to himself without aggression, and he did not sleep throughout the night, and the APP prescribed medication to treat his altered mental status.

**On December 9, 2024**, during MHU rounds, an RN documented Mr. RUIZ Guillen’s refusal to follow verbal commands and answer medical questions, and that he struck a custody officer, and the RN notified an APP. The APP ordered a one-time dose of lorazepam (produces a calming effect) and referred Mr. RUIZ Guillen to Larkin South Community Hospital (LSCH) for further evaluation.

- **On the same date**, an LSCH physician noted Mr. RUIZ Guillen displayed uncooperative behavior, incoherent mumbling, and occasional screaming.

**Between December 11 and 15, 2024**, Mr. RUIZ Guillen received critical care at LSCH for acute psychosis.

**Between December 16 and 31, 2024**, an LSCH physician diagnosed Mr. RUIZ Guillen with hyperosmolality (elevated level of solutes in the blood), hypernatremia (high concentration of sodium in the blood), organic catatonic disorder (neuropsychiatric syndrome that affects consciousness, attention, perception, and memory), and rhabdomyolysis (breakdown of muscle tissues), for which Mr. RUIZ Guillen received treatment.

- **On January 1, 2025**, LSCH medical staff transferred Mr. RUIZ Guillen to Larkin Behavioral Health Hospital Services (LBHS) for psychiatric treatment.
- **On January 8, 2025**, LBHS medical staff transferred Mr. RUIZ Guillen to Larkin Community Hospital Palm Springs (LCHPS) due to unresolved rhabdomyolysis.

**On January 23, 2025, at approximately 7:20 a.m.**, Mr. RUIZ Guillen had breathing difficulty, prompting a medical emergency.

- **Between 7:20 and 8:07 a.m.**, LCHPS medical staff initiated and provided life-saving measures, including delivery of cardiopulmonary resuscitation, administration of advanced cardiac life support medications, and delivery of five defibrillator shocks.

**At approximately 8:07 a.m.**, an LCHPS physician declared Mr. RUIZ Guillen deceased.