DIVISION OF COMPLIANCE, STANDARDS, AND INSPECTIONS
SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
REPORT OF INMATE DEATH

(Sections 24-9-35 and 17-7-10, South Carolina Code of Laws)
(Standards 1047 and 1049, Minimum Standards for Local Detention Facilities in South Carolina)
(SCDC Policies/Procedures HS-18.04 and PS-10.05)

1. FACILITY: Chesterfield County Detention Center
2. NAME OF DECEASED: Steven Bruce Medlin SCDC#
3. HOME ADDRESS: 3704 Richardson Road Trail, Monroe, NC 28112
4. DESCRIPTION: DOB 07/31/1990 HEIGHT 5'09" WEIGHT 163 HAIR Brown
   EYES Hazel SEX Male RACE White SOC SEC#
5. ARRESTING OFFENSE(S): Simple Possession of Marijuana 7102P1010503, Giving False Info 7102P1010504, Violation of Court Ordered of Protection 7102P1010505 SENTENCED ☑ PRETRIAL ☐
6. DATE AND TIME OF COMMITMENT: 9/13/18 20:00
7. NAME AND ADDRESS OF RELATIVE(S) OF THE DECEASED CONTACTED: Kim Medlin (mother)
   612 E. Sandy Ridge Road, Monroe, NC (980)635-9741
8. RECORD OF DECEASED INMATE'S PHYSICAL CONDITION UPON ADMISSION: Inmate was scratches and sores on neck, arms and legs - stable condition
9. CAUSE OF DEATH: unknown
10. TIME AND DATE OF DEATH: ____ a.m. 16:35 p.m. ____ day 7th month October year 2018
11. NAME OF DOCTOR WHO PRONOUNCED DEATH: Dr. Fritz Basile
12. NAME OF CORONER WHO ORDERED AUTOPSY: Kip Kiser
13. AUTOPSY PERFORMED BY: MUSC
14. NAME OF PERSON DISCOVERING DECEASED, TIME DISCOVERED, AND LOCATION WITHIN FACILITY: Sgt. Lowallen, ofc. Anderson, ofc. Washington
15. AT THE TIME OF DEATH: 62 (Actual Count) 4 (# of Officers on Duty)
16. WHEN INMATE WAS LAST SEEN ALIVE: when he left the detention center

NOTIFY BY TELEPHONE AT: (803) 896-8502

MAIL OR DELIVER REPORT TO:

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
DIVISION OF COMPLIANCE, STANDARDS, AND INSPECTIONS
POST OFFICE BOX 21787
COLUMBIA, SOUTH CAROLINA 29221

Sheila Gillespie
SIGNATURE OF OFFICIAL MAKING REPORT

Sheila Gillespie, Jail Administrator
TYPED OR PRINTED TITLE OF OFFICIAL

10/7/18
DATE OF REPORT

SCDC 8-2 (Revised July, 2011)