**Record of Death**

Provided by South Carolina Department of Corrections, February 1, 2022

**Name:** SIMS, RICKY JERMONE

**SCDC#:** 213129

**Sex:** M

**Race/ethnicity:** Black or African American, not of Hispanic origin

**Date of birth:** 5/22/1961

**Date of commitment:** 4/6/2015

**Date of death:** 8/24/2016

**Cause of death:** Natural Cause

**Assigned institution:** LEE

**Death location:** LEE

**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: Lee Correctional Institution
2. NAME OF DECEASED: Ricky Jerome Sims SCDC# 213129
3. HOME ADDRESS: [redacted]
4. DESCRIPTION: DOB [redacted] HEIGHT 6'1 WEIGHT 270 HAIR Black
   EYES Brown SEX Male RACE Black SOC SEC # _____
5. ARRESTING OFFENSE(S): Trafficking in Illegal Drugs
   SENTENCED ☑ PRETRIAL ☐
6. DATE AND TIME OF COMMITMENT: April 06, 2015
7. NAME AND ADDRESS OF RELATIVE(S) OF THE DECEASED CONTACTED: [redacted]
8. RECORD OF DECEASED INMATE'S PHYSICAL CONDITION UPON ADMISSION: _____
9. CAUSE OF DEATH: Natural Causes
10. TIME AND DATE OF DEATH: ____ a.m. 11:56 p.m. 24 day August month 2016 year
11. NAME OF DOCTOR WHO PRONOUNCED DEATH: Larry Logan
12. NAME OF CORONER WHO ORDERED AUTOPSY: _____
13. AUTOPSY PERFORMED BY: _____
14. NAME OF PERSON DISCOVERING DECEASED, TIME DISCOVERED, AND LOCATION WITHIN FACILITY: Nurse Wanda Allen at Approximately 10:45 am Medical Emergency Room
15. AT THE TIME OF DEATH: 1378 (Actual Count) 20 (# of Officers on Duty)
16. WHEN INMATE WAS LAST SEEN ALIVE: On August 24, 2016 at 11:00 pm in the F-5 Unit

**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**

SIGNATURE OF OFFICIAL MAKING REPORT

MAJOR
TYPED OR PRINTED TITLE OF OFFICIAL

September 1, 2016
DATE OF REPORT

SCDC 8-2 (Revised July 1, 2011)

**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: Lee Correctional Institution
2. NAME OF DECEASED: Ricky Jerome Sims Sims SCDC# 213129
3. HOME ADDRESS: [redacted]
4. DESCRIPTION: DOB [redacted] HEIGHT 6'1 WEIGHT 270 HAIR Black
   EYES Brown SEX Male RACE Black SOC SEC # _____
5. ARRESTING OFFENSE(S): Trafficking in Illegal Drugs
   _____ SENTENCED ☑ PRETRIAL ☐
6. DATE AND TIME OF COMMITMENT: April 06, 2015
7. NAME AND ADDRESS OF RELATIVE(S) OF THE DECEASED CONTACTED: [redacted]
8. RECORD OF DECEASED INMATE'S PHYSICAL CONDITION UPON ADMISSION: _____
9. CAUSE OF DEATH: Natural Causes
10. TIME AND DATE OF DEATH: ____ a.m. 11:56 p.m. 24 day August month 2016 year
11. NAME OF DOCTOR WHO PRONOUNCED DEATH: Larry Logan
12. NAME OF CORONER WHO ORDERED AUTOPSY: _____
13. AUTOPSY PERFORMED BY: _____
14. NAME OF PERSON DISCOVERING DECEASED, TIME DISCOVERED, AND LOCATION WITHIN FACILITY: Nurse Wanda Allen at Approximately 10:45 am Medical Emergency Room
15. AT THE TIME OF DEATH: 1378 (Actual Count) 20 (# of Officers on Duty)
16. WHEN INMATE WAS LAST SEEN ALIVE: On August 24, 2016 at 11:00 pm in the F-5 Unit

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

SIGNATURE OF OFFICIAL MAKING REPORT

MAJOR
TYPED OR PRINTED TITLE OF OFFICIAL

September 1, 2016
DATE OF REPORT

SCDC 8-2 (Revised July 1, 2011)