Record of Death

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

Name: BACKUS, KENNETH

SCDC#: 297258

Sex: M

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

Date of birth: 10/29/1961

Date of commitment: 12/4/2015

Date of death: 3/19/2017

Cause of death: Natural Cause

Assigned institution: TURBEVILLE

Death location: TURBEVILLE

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: Turbeville Correctional Institution

2. NAME OF DECEASED: Kenneth [redacted]s SCDC# 297258

3. HOME ADDRESS: [redacted]

4. DESCRIPTION: DOB [redacted] HEIGHT 6'1" WEIGHT 165 HAIR Gray
EYES Brown SEX Male RACE Black SOC SEC [redacted]

5. ARRESTING OFFENSE(S): Attempted Murder
SENTENCED ☑ PRETRIAL ☐

6. DATE AND TIME OF COMMITMENT: 12/14/15

7. NAME AND ADDRESS OF RELATIVE(S) OF THE DECEASED CONTACTED: [redacted]

8. RECORD OF DECEASED INMATE'S PHYSICAL CONDITION UPON ADMISSION [redacted]

9. CAUSE OF DEATH: metastatic colon cancer

10. TIME AND DATE OF DEATH: 6:45 a.m. ____ p.m. 19th day March month 2017 year

11. NAME OF DOCTOR WHO PRONOUNCED DEATH: Samuel Hayes

12. NAME OF CORONER WHO ORDERED AUTOPSY: Samuel Hayes

13. AUTOPSY PERFORMED BY: Newberry Pathology

14. NAME OF PERSON DISCOVERING DECEASED, TIME DISCOVERED, AND LOCATION WITHIN FACILITY:
Faye Benton, RN in infirmary at approximately 6:25 a.m. in bed with agonal respirations and no pulse

15. AT THE TIME OF DEATH: 1116 (Actual Count) Approx. 18 (# of Officers on Duty)

16. WHEN INMATE WAS LAST SEEN ALIVE: 6:25 a.m. when CPR initiated

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

Gary Leamon
SIGNATURE OF OFFICIAL MAKING REPORT

Associate Warden Gary Leamon
TYPED OR PRINTED TITLE OF OFFICIAL

April 2, 2019
DATE OF REPORT

SCDC 8-2 (Revised July 1, 2011)