U.S. Immigration and Customs Enforcement (ICE)
Detainee Death Report: NAJAFABADI, Pejman Karshenas

Immigration and Criminal History

Mr. NAJAFABADI, a 59-year-old male citizen of Iran, was arrested by ICE Enforcement and Removal Operations (ERO) New Orleans on April 25, 2025, pursuant to an immigration detainer following his release from the Rutherford County Sheriff's Office. On October 24, 2025, he was transferred to the Louisiana ICE Processing Center (LIPC) in Angola, Louisiana, pending removal.

Mr. NAJAFABADI had an extensive criminal history, including multiple arrests by the Metro Nashville Police Department and other agencies between 1992 and 2025. Charges included aggravated assault, criminal impersonation, driving offenses, theft, and drug-related offenses. He was convicted of misdemeanors for driving with a suspended license and theft, as well as a felony for conspiracy to possess with intent to distribute cocaine. Other charges were dismissed or have unknown dispositions. Recent arrests included DUI and drug possession in 2024 and 2025, with a conviction for simple drug possession (fentanyl); other charges were dismissed.

Synopsis of Events

Upon arrival at LIPC, Mr. NAJAFABADI received a medical intake screening conducted by a licensed practical nurse, followed by a comprehensive health assessment performed by an advanced practice provider (APP). The assessment documented a history of depression, hyperlipidemia, and hypertension since 2024. Mr. NAJAFABADI denied any family history of diabetes, heart disease, hypertension, or stroke.

His physical examination and vital signs were generally normal, except for elevated blood pressure and the presence of a cardiac murmur. Throughout his time in custody, Mr. NAJAFABADI's blood pressure readings remained consistently elevated. Medical staff adjusted his medication regimen and referred him to specialists for cardiology and pulmonology evaluations.

He was hospitalized multiple times for cardiac symptoms, including chest pain and difficulty breathing, and received several diagnoses for his medical issues. Mr. NAJAFABADI underwent several medical procedures, including heart catheterization, echocardiogram, and treatment for suspected infections. He was transferred between medical facilities for specialized care and received intravenous antibiotics and ongoing monitoring for his heart condition.

Mr. NAJAFABADI continued to experience complications, including respiratory distress, fever, and severe pain. He was treated for his medical condition, monitored for cardiac and respiratory symptoms, and received physical therapy.

On February 20, 2026, LIPC transferred Mr. NAJAFABADI to Riverbridge Specialty Hospital (RSH) in Vidalia, LA for inpatient admission and higher-level medical care. Between February 20

and 23, 2026, RSH medical staff admitted Mr. NAJAFABADI to the ICU, placed him on telemetry, noted he had a good appetite, and ordered routine laboratory tests (no abnormalities reported).

Between February 24 and 28, 2026, RSH medical staff reported Mr. NAJAFABADI experienced several intermittent episodes of shortness of breath (SOB) with oxygen saturation requiring supplemental oxygen to restore normal levels. RSH medical staff monitored his cardiac status, documented a physical therapy consultation, noted good walking ability and appetite, and performed a chest x-ray with results within normal limits.

On March 1, 2026, at 4:11 p.m., RSH medical staff reported that Mr. NAJAFABADI appeared alert, comfortable and denied any pain. Staff noted no new laboratory orders or scheduled physical therapy for the day. His vital signs were normal, except for a slightly elevated respiratory rate.

- Between 4:11 and 5:38 p.m.: Mr. NAJAFABADI collapsed and experienced cardiac arrest. RSH medical staff initiated life-saving measures, including cardiopulmonary resuscitation (CPR), and called emergency medical services (EMS).

- At 5:38 p.m.: EMS staff arrived, assumed care of Mr. NAJAFABADI, continued CPR and life-saving measures, and transferred him to Merrit Health Hospital (MHH).

- At 6:20 p.m.: MHH medical staff assumed care, continued CPR and life-saving measures, observed asystole, documented cyanosis, unresponsiveness, and no respiratory effort, and were unable to revive him.

- At 6:28 p.m.: An MHH physician pronounced Mr. NAJAFABADI deceased.

A preliminary autopsy determined that severe aortic valve disease was the primary cause of death, with hypertension and atherosclerotic heart disease identified as contributing factors.