Child Fatality Summary

Child's Name: Bryan Boyer County: Polk

Report Number: 2024-155295

Family Composition Chart

Name	Age at Time of the Incident	Relationship with Deceased Child
Bryan Boyer	4 years old	Child Victim
	16 years old	Child in the Home
Patricia Saintizaire	36 years old	Self-Purported Mother
Rene Saintizaire	61 years old	Self-Purported Stepfather

Circumstances Surrounding Death

On May 2, 2024, this 4-year-old child passed away after suffering apparent physical injuries.

According to information gathered by both the Child Protective Investigator assigned to this fatality investigation and the Case Manager assigned to the resultant court-ordered services case regarding the other child in the home, neither adult referenced above is biologically or legally related to either child. Both children were born in Haiti, and have only been in the United States since 2023.

The decedent's biological mother was reportedly an older teenager/very young woman who initially wanted to terminate the pregnancy, as she wished to come to the United States from Haiti and was concerned that her own mother (who was supporting her from the US at the time) would not approve of her having become pregnant out of wedlock. However, Mrs. Saintizaire convinced the biological mother to have the child, arranging that she would give the biological mother money as well as take the child to raise as her own. It is unknown when this exchange between caregivers occurred, although it does appear that the deceased child resided with Mrs. Saintizaire for the majority of his life, both in Haiti then subsequently in the US.

The older child in the home was also born in Haiti, and following his removal from Mrs. Saintizaire's care as a result of the younger child's death, a DNA test was conducted to determine his parentage. His biological father was purported to be an individual who died in Haiti in May 2015, so DNA testing could not be completed for him. The biological mother was determined to be an individual who may now reside in the US as well, and who is not biologically or legally related to either Mrs. Saintizaire or her husband (as there was an almost 100% match between the biological mother and that child, but no

familial match to Mrs. Saintizaire, despite that she and the biological mother coincidentally share the same maiden surname). As with the deceased child, the older child was also placed in Mrs. Saintizaire and her husband's physical care at some point, prior to the entire "family" unit coming to the US. There is some information to indicate that the child may have been the victim of trafficking for several years prior to coming to the US, but as this information was provided directly by the child himself, further details of this history could not be confirmed (the ongoing Case Manager is prohibited by law enforcement from having any contact with anyone involved in the fatality case other than the teenage child, due to the severe nature of the pending judicial/criminal proceedings against Mrs. Saintizaire.

For purposes of this report and ease of reading, however, Mrs. Saintizaire will hereafter be referred to as "the mother" and her husband will be referred to as "the stepfather", despite the above circumstances. The decedent will be referred to as either "the child" or "the decedent", and the other child in the home will be referred to as "the teenager"

According to the family, the following information was provided.

The mother indicated that she works from 5:00 a.m. to 1:00 p.m. and that the stepfather brings the child to school in the mornings. She stated that on the morning of May 1, 2024, the child had a slight fever but was still able to go to school. He gets off the bus from school at approximately 5:00 p.m. The child told her he was feeling weak when he arrived home, and she put him to bed for a nap. The mother noted that the week prior, she and both children had the flu. The mother was at home with the two boys and the father was at work for his normal shift from 12:30 p.m. to 11 p.m. Between 7:00 and 8:00 p.m., the mother woke the child up, gave him a bath, sat him back in bed, and fed him a cup of noodles. After the child finished eating, he began shaking on and off and told the mother that he could feel himself shaking. The child then vomited two to three times through his nose and his mouth. The mother noticed the child was bleeding a little bit from his nose and appeared as if he was losing consciousness. The mother told the teenager to get the car ready, so he went outside to start the car and came back inside to grab the child. As they were walking outside, the child began shaking again and slid out of the teenager's arms. The child hit the ground on his back and the teenager was able to catch his head. The teenager got in the car with the child and laid him on his lap while the mother drove. The mother and teenager called 911 on the way to Advent Health Heart of Florida Davenport. The child was assessed there and subsequently airlifted to Advent Health Orlando.

Per the Advent Health Records, <u>History of Present Illness</u>: "Bryan is a 4 y.o. male with a history of iron deficiency anemia who was admitted to the PICU s/p cardiac arrest with associated hemorrhagic shock, acute hypoxic and hypercarbic respiratory failure, lactic acidosis, coagulopathy and transaminitis. Parents are present at bedside and report that the patient was in his usual state of health on the morning of admission. During the afternoon the patient was more tired and was place (sic) down for a nap. Mother then woke him up to eat dinner, shortly after staring (sic) to eat he became pale, limp and unresponsive. He has had an associated fever. The patient arrived to the Heart of

Florida emergency room reportedly being carried by his Mother. He was noted to be cyanotic and was found to be asystolic. CPR was initiated with approximately 7-8 rounds of epinephrine before ROSC was achieved. Patient was also endotracheally intubated in the emergency department. Additionally, he was given sodium bicarbonate, atropine and Narcan. Baseline laboratory studies were obtained which showed severe anemia, leukocytosis, transaminitis and coagulopathy. He was started on Epinephrine and Norepinephrine gtts. FAST test was done which (was) reportedly positive for free fluid in the abdomen. Cultures were obtained and he was started on broad spectrum antibiotic therapy. He was subsequently transferred via critical care transport to the PICU for continued care. Upon arrival to the PICU the patient was noted to be on robust vasopressor support, finishing 1 unit of PRBCs. Abdomen was noted to be distended and firm upon examination and given free fluid on FAST examination. Pediatric Surgery was consulted. FAST exam was repeated by Pediatric Surgery which confirmed significant free fluid all throughout his abdomen. Massive transfusion protocol was initiated. Patient underwent emergent bedside exploratory laparotomy, found to have duodenal hematoma. Despite ongoing blood product transfusions (In total received 7 units PRBCs, 3 FFP, 2 platelets and 2 cryoprecipitate) and maximal medical management patient had continued bleeding and refractory coagulopathy. Patient went on to develop worsening hypotension and subsequently PEA. CPR was initiated, however, ROSC was not obtained."

On May 2, 2024, the child was pronounced deceased at 5:33 a.m.

School collateral contacts indicated the child was present at school on Monday, April 29, 2024. On that date, he had a swollen lip and the school nurse who looked at it stated it appeared as if he might have bitten his lip. The child was not present in school on Tuesday, April 30, 2024, but did return on Wednesday, May 1, 2024, with his lip less swollen. On that day the child was not eating as he usually did, but other than that he appeared to be healthy. He did not have a fever at any point in the day and never complained of his stomach hurting. Video footage from the school was observed of the child walking to the bus area at 3:21 p.m., and he appeared to be walking and running around by himself. He did not seem to be sick or unable to walk by himself in the video footage.

The Polk County Sheriff's Office investigated the death of the child (2024-013278). On May 8, 2024, Patricia Saintizaire was arrested and charged with First Degree Murder, Aggravated Child Abuse, and Tampering with a Witness. A Grand Jury indicted her on First Degree Murder, Aggravated Child Abuse by Aggravated Battery (two Counts), Child Abuse, and Tampering in Felony Life Capital Proceeding.

The death certificate was received on June 4, 2024, and indicated District 18 Medical Examiner Joshua D. Stephany, M.D., signed and certified the death certificate for the child on May 30, 2024. ME# 24-09-0814

Cause of Death: Blunt Force Trauma

Manner of Death: Homicide

Fatality Summary Boyer, Bryan

On January 14, 2025, the Department of Children and Families' investigation was closed with:

- Verified Findings of Death, Physical Injury, Bizarre Punishment, Asphyxiation, Internal Injuries, and Inadequate Supervision as to the child, with the mother as the caregiver responsible;
- Verified Findings of Failure to Protect as to the child, with the mother and the stepfather as the caregivers responsible;
- Verified Findings of Physical Injury as to the child, with the stepfather as the caregiver responsible;
- Not Substantiated Findings of Mental Injury as to the child; and

Other Children in the Family:

Present danger was identified, and the teenager was deemed to be unsafe and was sheltered on May 3, 2024.

Grief counseling information was provided to the family.

Summary of Current Agency Involvement with Family

The family did not have any open services.

Summary of Prior Agency Involvement with Family

The family has one prior abuse report in November 2023, involving concerns of physical injury as to the deceased child, and the case was closed with Not Substantiated Findings.

	4/7/25
Central Region Child Fatality Prevention Specialist Kirby Morgan	Date
Sois	4/7/25
Central Region Director of Child Protection Stephanie Weis	Date