



INDEPENDENT INVESTIGATIONS DIVISION

Report Concerning the Police-Involved Death in
Baltimore on June 25, 2025

May 7, 2026

Public Release: May 13, 2026

Declination Report Concerning the Officer-Involved Death of Pytorcarcha Brooks on June 25, 2025

The Independent Investigations Division of the Maryland Office of the Attorney General (the “IID”) is charged with investigating “police-involved incidents that result in the death of individuals or injuries likely to result in death.”¹ If the Attorney General determines that the investigation provides sufficient grounds for prosecution, then the IID “shall have exclusive authority to prosecute the offense.”²

I. Introduction

On Wednesday, June 25, 2025, at approximately 1:35 p.m., officers with the Baltimore Police Department (BPD) responded to 911 calls for a welfare check and a behavioral health crisis at a house in the 2700 block of Mosher Street in Baltimore, Maryland. After their attempts to complete the welfare check were unsuccessful, the officers entered the house to enable a medic to conduct an evaluation for an emergency petition. Inside, the officers encountered the sole occupant, an adult woman, holding a knife. It appeared that the woman was experiencing a mental health crisis. Officers issued multiple verbal commands instructing the woman to drop the knife, but the woman did not comply. One officer deployed a Taser, which struck the woman. The woman immediately stood up after the Taser deployment and then moved towards the officers with the knife still in her hand. As one of the officers began to retreat, he tripped over a piece of furniture and fell to the ground. The woman quickly advanced toward the officer on the ground while still armed with the knife. At that point, a second officer discharged his firearm, which struck the woman. Officers rendered aid to the woman until emergency medical services (“EMS”) arrived and took over care. The woman was transported to a nearby hospital, where she was pronounced dead a short time later.

After completing its investigation and evaluating all available evidence, the Office of the Attorney General has determined that there is insufficient evidence to prove beyond a reasonable doubt that the subject officers committed a crime under Maryland law. Accordingly, the Attorney General has declined to prosecute the subject officers in this case.

The IID’s investigation focused exclusively on potential criminal culpability relating to the subject officers’ conduct. By statute, the IID only has jurisdiction to investigate the actions of police officers, not those of any other individuals involved in the incident. Moreover, the IID’s analysis does not consider issues of civil liability or the department’s administrative review of the officers’ conduct. Compelled statements by subject officers may be considered in civil or administrative processes but may not be used in criminal prosecutions due to the subject officers’ Fifth Amendment rights. If any compelled statements exist in this case, they have not been considered in the IID’s investigation.

This report is composed of a factual narrative followed by a legal analysis. Every fact in the narrative is supported by the evidence obtained in this investigation, including forensic and autopsy reports, police radio transmissions, dispatch records, police and EMS reports, police body-

¹ Md. Code, State Gov’t § 6-602 (c)(1).

² Md. Code, State Gov’t § 6-604 (a)(1).

worn camera footage, photographs, department policy, and interviews with civilian and law enforcement witnesses. The subject officers did not make statements in this case, which had no impact on the prosecutorial decision.

The legal analysis explains why the IID will not bring charges under the relevant Maryland statutes.

This investigation involved one decedent and two subject officers.

- A. The decedent, Pytorcarcha Brooks, was 70 years old at the time of the incident. She was a Black female who lived in Baltimore, Maryland.
- B. Officer Stephen Colbert has been employed by BPD since March 2017. He is a Black male who was 37 years old at the time of the incident.
- C. Officer Stephen Galewski has been employed by BPD since November 2021. He is a White male who was 42 years old at the time of the incident.

The IID reviewed any and all available departmental disciplinary records and criminal histories for these involved parties and, where they existed, determined none were relevant to this investigation.

II. Factual Summary

On June 25, 2025, at approximately 1:00 p.m., a Maryland Department of Human Services social worker attempted to speak with Pytorcarcha Brooks at her house in the 2700 block of Mosher Street in Baltimore, Maryland. Ms. Brooks did not answer the door. The social worker called a close relative of Ms. Brooks, identified herein as John Doe³, and asked Mr. Doe to check on her. The social worker also contacted emergency services to request a welfare check. Baltimore City Fire Department (BCFD) medics, BPD Officer Stephen Colbert, his trainee, and a third officer riding in their cruiser were dispatched to the welfare check. Both Officer Colbert and the third officer were trained as Crisis Intervention Team (CIT) officers.⁴

While officers were enroute for the welfare check, Mr. Doe used his key to unlock the door and attempted to enter the house. However, Ms. Brooks kept Mr. Doe from entering by attempting to stab him with a kitchen knife. At 1:28 p.m., Mr. Doe retreated and called 911, reporting that Ms. Brooks was violent, experiencing a mental health crisis, armed with a knife, and barricaded inside her house. A second group of officers, including BPD Officer Stephen Galewski, were dispatched to Ms. Brooks's house as backup for the violent behavioral crisis call, and dispatchers updated BCFD medics.

³ For the duration of this report, Ms. Brooks's relative will be referred to as "John Doe" or "Mr. Doe" to preserve his privacy.

⁴ CIT officers are patrol officers who volunteer to undergo a selection process and receive 40 hours of specialized training in order to serve as responders to behavioral health-related calls for which a police response is necessary. Their primary purpose is to de-escalate an encounter with a person experiencing a mental health crisis, to return the person to a pre-crisis level, and divert the person to community resources when appropriate.

Officer Colbert's group arrived in front of Ms. Brooks's residence at 1:34 p.m. While Officer Colbert and his trainee knocked on Ms. Brooks's front door, the CIT officer spoke to Mr. Doe on the sidewalk in front of the house. Ms. Brooks did not answer the door. Over the next several minutes, the officers and Mr. Doe discussed Ms. Brooks's ongoing mental health issues. During that conversation, the officers learned that the CIT officer had previously interacted with Ms. Brooks and was aware of her mental health history. They also learned that an emergency petition had been obtained for Ms. Brooks earlier in the year and that, a few days prior, Ms. Brooks had attempted to stab another relative who was delivering her groceries. When the officers learned Mr. Doe had a key to Ms. Brooks's house, they followed him in order to open her back door.

At approximately 1:40 p.m., roughly the same time Mr. Doe and the officers arrived at the rear of the house, BCFD medics arrived on scene, along with Officer Galewski and two backup officers. The medics and officers knocked on Ms. Brooks's front door, but Ms. Brooks did not answer. Over the next few minutes, Officer Galewski attempted to radio Officer Colbert for an update but was unsuccessful due to noise from nearby construction.

At Ms. Brooks's back door, Officer Colbert, the trainee, and the CIT officer loudly announced that they were BPD officers and then used Mr. Doe's key to unlock the back door to speak to Ms. Brooks. As Officer Colbert pushed the door ajar, Mr. Doe warned that Ms. Brooks had used a heavy object to block the door and that she might try to stab Officer Colbert. When Officer Colbert stepped back from the doorframe, Ms. Brooks closed and locked the door without interacting with them. At that point, Officer Colbert told Mr. Doe that because Ms. Brooks was in her own home, and able to close and lock the door, the police response for a welfare check was complete. Officer Colbert explained that Mr. Doe needed to work with his relatives to secure an emergency petition and long-term care for Ms. Brooks. Officer Colbert also spoke with another of Ms. Brooks's relatives via Mr. Doe's phone; this relative advised that he would arrive in fifteen minutes to help resolve the situation.

At 1:45 p.m., the medics, Officer Galewski, and the two backup officers met up with Officer Colbert, Mr. Doe, and the other officers at the back door. For the next several minutes, Mr. Doe and the officers explained the situation to the new arrivals. Based on various factors discussed during that conversation—such as Ms. Brooks's age, living conditions, mental health history, and her recent erratic behavior—the lead medic stated that under BCFD protocol, he needed to “lay eyes on” Ms. Brooks to make sure that she was safe and cognizant before the medics could leave. At no point was there any indication that anyone other than Ms. Brooks was inside of the house.

At 1:56 p.m., the officers, medics, and Mr. Doe approached Ms. Brooks's back door and attempted to speak with her again. The lead medic loudly announced that he was with BCFD and needed to speak with Ms. Brooks to make sure that she was safe. He then began to ask Ms. Brooks questions to assess her capacity to refuse care. Other than incoherent statements and profanities, Ms. Brooks's responses to the questions were muffled by the closed door. The medic and a BPD officer also smelled a strong odor of decomposition coming through the door from inside the house.

and learned that Ms. Brooks had been living without power for several weeks.⁵ According to one witness officer, “it smelled like death” inside the residence.

The lead medic then asked the BPD officers to assist him with opening the back door so that he could hear and communicate with Ms. Brooks more clearly. At approximately 2:00 p.m., after Officer Colbert unsuccessfully attempted to push the door open with his foot, Officer Galewski put his shoulder against the door and pushed it slightly ajar.

As soon as the door opened, Ms. Brooks slashed the knife at Officer Galewski through the opening of the door. As Officer Galewski backed away and spoke to try to calm her down, Ms. Brooks leaned out of the door and brandished the knife, then closed the door. A few seconds later, the lead medic told the officers “[s]he’s going,” which the on-scene officers understood to mean that Ms. Brooks would need to be taken to the hospital involuntarily. According to a witness officer



Image 1: A still from Officer Galewski’s body-worn camera, showing Ms. Brooks holding a knife after swiping it at Officer Galewski.

at the scene, the officers recognized that they would “need to make sure that there is nothing dead” inside the house. In addition, the officers decided “we need to EP [(emergency petition) Ms. Brooks] because your normal person is not going to swing a knife at a police officer.” According to the witness officer, they believed at that moment that they had sufficient basis for an emergency petition.⁶

⁵ The temperature in Baltimore was over 100 degrees on the date of this incident and had been for the prior two days.

⁶ Emergency Petitions may be sought pursuant to Md. Code, Health Gen. § 10-622 (providing that a petition for an emergency evaluation may be sought by an officer who has observed the individual’s behavior and has reason to believe that the individual has a mental disorder and presents a danger to the life or safety of the individual or others).

The officers had a brief discussion about how to secure Ms. Brooks to transport her to the hospital. Because the back door was partially blocked by a heavy object, they decided that the safest path was to enter through the front door. The lead medic offered to call a firefighter with breaching tools to assist with entry, but Officer Colbert declined. The medics headed toward their vehicle to bring it to the front of Ms. Brooks’s house, and all six officers walked to Ms. Brooks’s front door. Along the way, Officers Galewski and Colbert discussed their intention to enter the house by kicking the front door open and then trying to talk down and, if necessary, subdue Ms. Brooks with a taser so that she could be taken to the hospital.



Image 2: A still photograph from Officer Galewski’s body-worn camera, showing Ms. Brooks armed with a knife, circled in green, in the foyer.

Officers Colbert and Galewski arrived at the front door at 2:02 p.m., and Officer Galewski requested that dispatchers “hold the air”— i.e., keep the radio traffic clear in case of an emergency. Neither officer contacted a supervisor nor radioed that they were forcing entry into the house. Instead, Officer Colbert kicked in the front door and both officers announced themselves as police. Officer Galewski kicked in a second locked door and entered the house with his taser drawn. Inside, Ms. Brooks stood in the foyer holding a knife in a fighting stance and saying, “[c]ome on.” Officers Galewski and Colbert commanded her to drop the weapon and told her that they were taking her to the hospital. Ms. Brooks refused to drop the knife and initially moved away from Officer Galewski toward a staircase. A moment later, however, she turned around and advanced towards Officer Galewski with the knife.



Image 3: A crime scene photograph of the knife that Ms. Brooks was holding during the incident.

When Ms. Brooks advanced, Officer Galewski backed away from her and into her living room, warning Ms. Brooks that he would tase her if she did not drop the weapon. Officer Colbert remained in the doorway and continued to give loud commands for Ms. Brooks to drop the knife. Ms. Brooks did not obey the officers' commands. Officer Galewski fired his taser at Ms. Brooks when she advanced toward him. The taser struck Ms. Brooks and she fell onto her couch for a few seconds, then stood up and immediately began advancing towards Officer Galewski again. At 2:03 p.m., Officer Galewski continued backing away from Ms. Brooks towards the front door. Officer Colbert briefly backed onto the porch to make room for Officer Galewski to exit. As Officer Galewski was backing away from Ms. Brooks toward the front door, he tripped over a piece of furniture and fell onto his back.



Image 4: A still from Officer Galewski's body-worn camera, showing the moment Ms. Brooks raised the knife to stab down at Officer Galewski while he was on his back.

When Officer Galewski fell, Ms. Brooks moved quickly forward, then raised the knife and began to stab it downward toward Officer Galewski. As Ms. Brooks moved to stab Officer Galewski, Officer Colbert fired his service weapon at her multiple times, and the trainee officer deployed her taser at Ms. Brooks from over Officer Colbert's shoulder. The gunfire struck Ms. Brooks, and she fell to the ground. Multiple officers moved toward her and began to render aid while calling for BCFD medics. Ms. Brooks was transported to a local hospital, where she was later pronounced deceased.

III. Supplemental Information

A. Autopsy

The Office of the Chief Medical Examiner (the “OCME”) performed an autopsy on Ms. Brooks on June 26, 2025. The Medical Examiner determined that Ms. Brooks died from multiple gunshot wounds. The manner of death was ruled a “Homicide.”⁷ Ms. Brooks suffered three gunshot wounds to her torso and one to her arm. There was no evidence of soot deposition or gunpowder stippling on any of the wounds, meaning that Ms. Brooks was not shot at close range. The OCME toxicology tests detected no substances in Ms. Brooks’s body.

B. Department Policy

1. Baltimore Police Department

BPD has policies on the use of force, including the use of deadly force (Policy 1115) and the use of firearms (Policy 409). These two policies state an officer “shall use only the force Reasonable, Necessary, and Proportional to respond to the threat or resistance to effectively and safely resolve an incident and will immediately reduce the level of force as the threat or resistance diminishes.”

The policies define those terms as follows:

- Reasonable: “A member uses Reasonable Force when the member uses no more force than required to perform a lawful purpose.”
- Necessary: “Force is necessary only when no reasonably effective alternative exists.”
- Proportional: “Proportionality measures whether the force used by the member is rationally related to the level of resistance or aggression confronting the member.”

The use of force policy specifies that “[t]he use of Deadly Force/Lethal Force shall always be the last resort,” and shall occur only when officers “reasonably believe such action is immediately necessary to protect a member or another person from an Imminent Threat of death or Serious Physical Injury.” Before using deadly force, officers “shall consider environmental considerations such as field of fire, backdrop.”

Beginning in April 2025, BPD created an in-service training module on “Behavioral Crisis Barricades.” The policy was to be fully implemented after all BPD officers received the updated training, but that had not yet occurred at the time of this incident. However, an officer who received

⁷ Manner of death is a classification used to define whether a death is from intentional causes, unintentional causes, natural causes, or undetermined causes. The Maryland Office of Chief Medical Examiner uses five categories of manner of death: natural, accident, suicide, homicide, and undetermined. “Homicide” applies when death results from a volitional act committed by another person to cause fear, harm, or death. These terms are not considered a legal determination, rather they are largely used to assist in the collection of public health statistics. “A Guide for Manner of Death Classification,” First Edition, National Association of Medical Examiners, February 2002.

the training was required to apply it. A Behavioral Crisis Barricade is defined as any incident in which a person: (1) does not pose an imminent threat to others; (2) appears to be experiencing a behavioral health crisis; (3) is subject to detention as part of an existing Emergency Petition or so that an Emergency Petition can be completed or is wanted for a crime other than a felony involving violence; and (4) that person attempts to evade capture or avoid police contact by occupying a barricaded position from which they refuse to exit.

The draft policy and training module extensively discusses strategic disengagement, a new, optional tactic for dealing with Behavioral Crisis Barricades. Strategic disengagement is the tactical decision to delay contact with the individual (i.e., establish a perimeter without directly engaging) or to leave with a plan to re-engage later. The purpose of strategic disengagement is to de-escalate the situation and improve the chances of peacefully resolving a mental health crisis. Under the policy, strategic disengagement is not appropriate when there is an imminent threat to the safety of individuals other than the subject or the subject has committed crime which calls for immediate apprehension.

Additionally, BPD has written policies for crisis intervention programs (Policy 712), de-escalation (Policy 1107), and Emergency Petitions (Policy 713). Officers may suspect that a person is experiencing a behavioral health incident based on a variety of factors, including information provided to dispatch or officers directly by witnesses, or an officer's direct observation of unusual behavior, agitation, or threatening violence towards others. In those circumstances, officers must use de-escalation techniques and tactics, such as slowing down the pace of an incident, maximizing space to increase reaction time, and communicating in an effort to peacefully resolve an incident without resorting to the use of force.

Additionally, CIT trained officers must take the lead on the scene of behavioral health incidents unless relieved by a supervisor. CIT trained officers are responsible for assessing the nature and severity of the behavioral crisis, and determining whether the person in crisis is a danger to themselves or others. Before trying to contact the person in crisis, officers at the scene should try to obtain additional information about the person, e.g., past behavioral health incidents, family or support systems in place that could help de-escalate the situation, and the use of medications/refusal to take them. If a person in crisis represents a danger to themselves or others and is unwilling to be admitted for treatment and the conditions for Emergency Petition are met, the officers must take steps to de-escalate when feasible, then complete an Emergency Petition, and involuntarily transport the person to the most appropriate medical facility. BPD policy requires that officers shall only initiate an Emergency Petition if de-escalation and behavioral health resources cannot address a danger to the life and safety of the person in crisis or others. CIT officers are expected to take a proactive leadership role during behavioral health incidents and use their additional training to work toward a peaceful resolution of the crisis.

BPD officers also are trained on dual response scenarios, meaning situations where BPD officers respond alongside BCFD medics to behavioral health incidents. During those incidents, there are different facets of the response where BPD defers to BCFD, and vice versa. For example, BPD is responsible for assessing and maintaining scene security and providing restraint of a patient, if necessary, while BCFD identifies the patient and assesses their medical needs and capacity to refuse treatment. To resolve the incident, officers and medics talk with each other to

determine the necessary next steps and who is responsible for each step. Those next steps may include transportation to a hospital or coordination with a mental health service provider. The training is generally geared toward encounters with people in public spaces and does not provide any additional guidance on BPD forcing entry into a home to restrain a patient for BCFD.

2. Baltimore Fire Department Policy

BCFD Manual of Procedure 809-3 and the Maryland Medical Protocols for Emergency Medical Services provide guidance on managing combative patients and behavioral health incidents. Both policies stress that BCFD medics are responsible for determining the capacity of a patient to refuse care. In both policies, a person exhibiting an altered mental state is inherently unable to refuse care. Additionally, if the determination is made that a patient must be physically restrained in order to be safely treated and/or transported, BPD officers are expected to assist BCFD by conducting the restraint.

IV. Legal Analysis

After a criminal investigation, the IID must determine whether to bring criminal charges against a person to hold them accountable pursuant to Maryland law. When making that determination, we have a legal and ethical duty to charge a person with a crime only when we can meet the State's burden of proof; that is, when the available evidence can prove each element of that crime beyond a reasonable doubt. We must also determine whether the accused person could raise an affirmative defense. In those cases, the IID not only needs to prove the crime, but also needs to determine whether the evidence could disprove the defense beyond a reasonable doubt. Ultimately, the decision to bring any charges rests on whether the available evidence is sufficient for us to meet those standards.

Based on the evidence, three offenses were considered in this case. First, we considered the Use of Force Statute, which makes it a crime for officers to intentionally use excessive force.⁸ Next, we considered homicide related charges based on the intentional killing of another person.⁹

There is insufficient evidence to prove that the subject officers violated any criminal statutes. Accordingly, the IID will not pursue criminal charges against either of the subject officers. This report explains in further detail why, based on the evidence, we could not prove beyond a reasonable doubt that any officer committed a crime.

A. Maryland Use of Force Statute

Proving a violation of the Use of Force Statute requires the IID to establish beyond a reasonable doubt that a subject officer:

⁸ See Md. Code, Public Safety § 3-524(d)(1).

⁹ MPJI-Cr 4:17; MPJI-Cr 4:17.2.

- (1) used force that was not necessary and proportional to prevent an imminent threat of physical injury to themselves or another person, or to accomplish a legitimate law enforcement objective;
- (2) intended to use force that was excessive, *i.e.*, not necessary and proportional under the circumstances; and
- (3) the use of excessive force resulted in serious bodily injury or death.¹⁰

Determining whether an officer’s use of force is “necessary and proportional” to prevent an imminent threat of physical injury to someone or accomplish a legitimate law enforcement objective is a fact-specific inquiry. Generally speaking, a use of force is considered “necessary and proportional” when an officer had no reasonable alternative available to the officer under the circumstances, the kind and degree of force was appropriate in light of the officer’s legitimate law enforcement objective, and it was not likely to result in harm that was out of proportion or too severe in relation to the officer’s law enforcement objective, given the context in which it was used.¹¹ When a factfinder—either a judge or a jury—conducts this analysis, they must consider the totality of the circumstances, including, but not limited to, the nature of the call for service, what occurred in the moments before force was used, what the subject officers knew at the time force was used, the time and distances involved, and whether the officer unnecessarily escalated the situation or created the moment that required the use of force.¹²

Based on the totality of the circumstances, there is no evidence in this investigation that Officer Colbert or Officer Galewski intended to use force that exceeded that which was necessary and proportional to accomplish a legitimate law enforcement objective.¹³ Here, the subject officers entered Ms. Brooks’s home with the law enforcement community-caretaking objective of assisting the BCFD medic.¹⁴ The subject officers’ body-worn cameras show that they made entries at both

¹⁰ MPJI-Cr 4:36.

¹¹ For a more detailed discussion of the “necessary and proportional” standard, see [this opinion](#) written by the Office of the Attorney General. 107 Op. Atty. Gen. Md. 33 (2022).

¹² *Id.*; see also *Barnes v. Felix*, 605 U.S. 73, 80 (2025) (“[T]he ‘totality of the circumstances’ inquiry into a use of force has no time limit... earlier facts and circumstances may bear on how a reasonable officer would have understood and responded to later ones.”).

¹³ *Cf. Thornton v. State*, 397 Md. 704, 730-38 (2007) (Doing something that “turns out to [cause] serious bodily harm” cannot serve as a substitute for the intent to inflict bodily harm. A defendant “cannot be held liable, under an objective standard, for the ultimate consequence of death, if death or serious bodily harm ‘wasn’t what [they] were after.’”).

¹⁴ When considering a police officer’s warrantless, nonconsensual entry into a residence, courts have distinguished between entries conducted pursuant to a criminal investigation and those undertaken pursuant to law enforcement’s community caretaking functions. See, e.g., *Brigham City v. Stuart*, 547 U.S. 398, 404 (2006) (police may enter a home without a warrant to render emergency assistance to an injured occupant or to protect an occupant from imminent injury under the emergency aid exception); *Michigan v. Fisher*, 558 U.S. 45, 49 (2009) (the test for the emergency aid exception is whether there was an objectively reasonable basis for believing that medical assistance was needed or persons were in danger and officers do not need ironclad proof of a life threatening injury to invoke the exception); *San Francisco v. Sheehan*, 575 U.S. 600, 611-14 (2015) (where officers responded to a group home with a mentally ill woman who had been acting erratically and had threatened to kill a social worker, it was reasonable for police to move quickly if a delay would endanger lives, even when in hindsight it appeared the officers made mistakes); *Caniglia v. Strom*, 593 U.S. 194 (2021) (concurring opinions endorsed as likely reasonable hypothetical warrantless, nonconsensual searches of a home to conduct a welfare check on an elderly individual);

the back and front doors to assist the BCFD medic: first to facilitate an assessment of Ms. Brooks, and then to secure her for transportation to a hospital for a medical evaluation. The officers knew that Ms. Brooks was armed with a knife and experiencing a mental health crisis that had resulted in unpredictable and violent behavior towards her family members and the officers. Moreover, they were aware that the smell of “death” was emanating from Ms. Brooks’s home. Additionally, the medic communicated that Ms. Brooks lacked the capacity to refuse medical treatment and needed to be involuntarily evaluated.

Per BPD/BCFD dual response training, BPD officers are tasked with scene security and restraint of patients during an evaluation for an emergency petition. Officer Galewski initially opened Ms. Brooks’s back door to allow the BCFD medic to safely communicate with Ms. Brooks. The subject officers ultimately entered the house with a plan to subdue Ms. Brooks using verbal commands or, if necessary, a taser so that the medic could transport her to the hospital for evaluation. Both subject officers discussed their entry plans with other experienced officers on scene, including another CIT trained officer. None of the officers on scene voiced any objection to the entries or proposed an alternative solution, and they lined up behind the subject officers to assist them.

With respect to whether the use of force was necessary and proportional inside the house, the body-worn camera footage showed that Ms. Brooks was armed with a knife when the officers entered. Officer Galewski repeatedly tried to talk with Ms. Brooks, telling her that he was there to take her to the hospital and ordering her to drop the knife. Officer Galewski only deployed his taser after Ms. Brooks moved toward him with her knife. In addition, Officer Galewski attempted to back away from her when she moved forward with a knife. The fatal shot was fired only after Officer Galewski tripped and fell while backing towards the front doorway, where Officer Colbert had created room for him to exit the house. Officer Colbert fired his handgun at the moment that Ms. Brooks was standing over Officer Galewski and in a position to stab him with the knife.

In sum, given the available evidence, the IID could not prove beyond a reasonable doubt that the subject officers violated the Use of Force Statute. Accordingly, the Office of the Attorney General will not charge them with a violation of the Use of Force Statute.

B. Homicide Offenses

When a person is killed, there are four homicide charges that a prosecutor may consider in the State of Maryland:

- First Degree Murder: the willful, deliberate, and premeditated killing of another.¹⁵

State v. Alexander, 124 Md. App. 258, 277-87 (1998)(discussing warrantless entry into a home as part of the community caretaking function); *Wilson v. State*, 409 Md. 415, 432-42 (2009) (discussing seizures of individuals as part of the community caretaking function).

¹⁵ MPJI-Cr 4:17.

- Second Degree Murder: when the defendant intended to kill or inflict such serious injury that death would be the likely result and there was no justification or mitigating circumstances.¹⁶
- Voluntary Manslaughter: an intentional killing that is not murder because the defendant acted in partial self-defense.¹⁷
- Involuntary Manslaughter: when the defendant acted with gross negligence and that conduct caused the death of another.¹⁸

First Degree Murder was not considered in this case because there is no evidence that the shooting of Ms. Brooks was premeditated. Premeditation requires a prosecutor to prove that “the design to kill must have preceded the killing by an appreciable length of time, that is, time enough to be deliberate.”¹⁹ While this inquiry requires a fact-specific evaluation, a factfinder should consider the totality of the circumstances, including whether an individual is defending themselves against deadly force.²⁰ Involuntary manslaughter, meanwhile, only applies to grossly negligent or reckless acts that result in death, as opposed to the intentional act of killing another; as such, the offense is inapplicable in this case. As the shooting of Ms. Brooks was intentional, but not premeditated, Second-Degree Murder and Voluntary Manslaughter are the homicide offenses that remain for consideration.

If the evidence indicates that there is legal justification or certain mitigating circumstances involved, such as self-defense, then we could not prove the remaining homicide offenses against the subject officers.²¹ If a defendant has the requisite *mens rea* to uphold a claim of complete self-defense or defense of others, that is, a subjective belief that their or another’s life was in imminent danger that was objectively reasonable under the circumstances, then the claims are valid regardless of any unintended consequences.²² A police officer’s use of deadly force is legally justified if it is in complete self-defense, defense of others, or in furtherance of law enforcement related duties.²³

Complete self-defense and defense of others, also known as perfect self-defense, exists when the accused: (1) was not the initial aggressor (or did not raise the level of force to deadly force); (2) had the subjective belief that they or another person were in immediate or imminent danger of serious harm or death; (3) that belief was objectively reasonable; (4) used force that was not more than what was reasonably necessary in light of the threat or actual force; and (5) used force for the purpose of aiding the person that they were defending.²⁴ Complete self-defense and defense of others are affirmative defenses, which means that the IID must prove beyond a reasonable doubt that one of the elements of the defense is not applicable.

¹⁶ MPJI-Cr 4:17.

¹⁷ MPJI-Cr 4:17.2.

¹⁸ MPJI-Cr 4:17.8.

¹⁹ *Tichnell v. State*, 287 Md. 695, 717 (1980).

²⁰ *See Purnell v. State*, 250 Md. App 703, 714-715 (2021).

²¹ *See Malaska v. State*, 216 Md. App. 492, 517-522 (2014).

²² *Id.*

²³ MPJI-Cr 4:17.8; MPJI-Cr 4:17.3.

²⁴ *Porter v. State*, 455 Md. 220, 234-36 (2017); MPJI-Cr 4:17.2; MPJI-Cr 4:17.3.

When an officer has sufficient probable cause to believe that a person poses a “threat of serious physical harm,” then the officer may use deadly force,²⁵ and the reasonableness of that decision must be viewed from “the perspective of a reasonable police officer similarly situated.”²⁶ In practice, this means that a factfinder must consider that police officers often work under rapidly changing circumstances and that what constitutes a reasonable use of force may change from moment to moment.²⁷

Given the evidence presented here, the IID could not disprove the elements of defense of others. Ms. Brooks was armed with a knife, which she attempted to use against Mr. Doe and Officer Galewski. Officer Galewski entered Ms. Brooks’s house with a taser, a less-than-lethal weapon, which he did not deploy immediately. Instead, both subject officers gave Ms. Brooks several loud commands to drop the knife, but she did not comply. Officer Galewski deployed his taser only after Ms. Brooks approached him with the knife, even as he backed away from her. Further, Ms. Brooks moved to stab Officer Galewski after he fell onto his back while retreating away from her. At the time Officer Colbert fired his weapon, Officer Galewski faced an imminent threat of death or serious injury.

Based on the investigation, the actions of the subject officers do not constitute the crime of second-degree murder or voluntary manslaughter. We cannot overcome the elements of complete self-defense. Accordingly, the Office of the Attorney General will not charge the subject officers with a homicide offense.

VI. Conclusion

This report has presented factual findings, legal analysis, and conclusions relevant to the June 25, 2025, police-involved death of Pytorcarcha Brooks in Baltimore, Maryland. The Office of the Attorney General has declined to pursue charges in this case because, based on the evidence obtained in its investigation, there is insufficient evidence to prove beyond a reasonable doubt that the subject officers committed a crime.

²⁵ *Estate of Blair by Blair v. Austin*, 469 Md. 1, 23-24 (2020) (quoting *Tennessee v. Garner*, 471 U.S. 1, 11 (1985)).

²⁶ *State v. Albrecht*, 336 Md. 475, 501 (1994); *State v. Pagotto*, 361 Md. 528, 555 (2000).

²⁷ *Id.*