

## Discussing JFK's Torso Wounds, reddit version 1.0

After the shooting in Dealey Plaza, John F. Kennedy was brought to Parkland Memorial Hospital where the staff made some effort to resuscitate him. Dr. Charles Carrico observed a small bullet wound on the front of Kennedy's neck. Carrico tried to administer a breathing tube ([Warren Report, p. 53, Chapter 2: *\*The Assassination\**, *\*Parkland Memorial Hospital\**, *\*Treatment of President Kennedy\**] (<https://www.archives.gov/research/jfk/warren-commission-report/chapter-2.html#treatment>)). Then, Dr. Malcolm Perry decided to perform a [tracheotomy] (<https://en.wikipedia.org/wiki/Tracheotomy>). When Perry testified to the Warren Commission on 3/25/1964, he described using a scalpel to cut directly over the small throat wound: "...\*at the time I began the tracheotomy, I made an incision right through the wound which was present in the neck in order to gain complete control of any injury in the underlying trachea. I made a transverse incision right through this wound and carried it down to the superficial fascia, to expose the strap muscles overlying the thyroid and the trachea. There was an injury to the right lateral aspect of the trachea at the level of the external wound. The trachea was deviated slightly to the left and it was necessary to divide the strap muscles on the left side in order to gain access to the trachea\*" ([WC Vol. 6, p. 7] ([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Perry.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Perry.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/perry\\_m2.htm](http://mcadams.posc.mu.edu/russ/testimony/perry_m2.htm))]).

Dr. Perry testified again on 3/30/1964:

>Dr. PERRY - At the beginning I had removed my coat and watch as I entered the room and dropped it off in the corner, and as I was talking to Dr. Carrico in regard to the neck wound, I glanced cursorily at the head wound and noted its severe character, and then proceeded with the tracheotomy after donning a pair of gloves. I asked that someone call Dr. Kemp Clark, of neurosurgery, Dr. Robert McClelland, Dr. Charles Baxter, assistant professors of surgery, to come and assist. There were several other people in the room by this time, none of which I can identify. I then began the tracheotomy making a transverse incision right through the wound in the neck.

>Mr. SPECTER - Why did you elect to make the tracheotomy incision through the wound in the neck, Dr. Perry?

>Dr. PERRY - The area of the wound, as pointed out to you in the lower third of the neck anteriorly is customarily the spot one would electively perform the tracheotomy.

>This is one of the safest and easiest spots to reach the trachea. In addition the presence of the wound indicated to me there was possibly an underlying wound to the neck muscles in the neck, the carotid artery or the jugular vein. If you are going to control these it is necessary that the incision be as low, that is toward the heart or lungs as the wound if you are going to obtain adequate control.

>Therefore, for expediency's sake I went directly to that level to obtain control of the airway.

>Mr. SPECTER - Would you describe, in a general way and in lay terms, the purpose for the tracheotomy at that time?

>Dr. PERRY - Dr. Carrico had very judiciously placed an endotracheal tube but unfortunately due to the injury to the trachea, the cuff which is an inflatable balloon on the endotracheal tube was not below the tracheal injury and thus he could not secure the adequate airway that you would require to maintain respiration.

>(At this point, Mr. McCloy entered the hearing room.)

>Mr. SPECTER - Dr. Perry, you mentioned an injury to the trachea.

>Will you describe that as precisely as you can, please?

>Dr. PERRY - Yes. Once the transverse incision through the skin and subcutaneous tissues was made, it was necessary to separate the strap muscles covering the anterior muscles of the windpipe and thyroid. At that point the trachea was noted to be deviated slightly to the left and I found it necessary to sever the exterior strap muscles on the other side to reach the trachea.

>I noticed a small ragged laceration of the trachea on the anterior lateral right side. I could see the endotracheal tube which had been placed by Dr. Carrico in the wound, but there was evidence of air and blood around the tube because I noted the cuff was just above the injury to the trachea.

[...]

>Dr. PERRY - [...] At that point I was down in the trachea. Once the trachea had been exposed I took the knife and incised the windpipe at the point of the bullet injury. And asked that the endotracheal tube previously placed by Dr. Carrico be withdrawn slightly so I could insert a tracheotomy tube at this level. This was effected and attached to an anesthesia machine which had been brought down by Dr. Jenkins and Dr. Giesecke for better control of circulation. [...]

([WC Vol. 3, p. 366]([https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3\\_Perry.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3_Perry.pdf))  
[[text]([http://mcadams.posc.mu.edu/russ/testimony/perry\\_m1.htm](http://mcadams.posc.mu.edu/russ/testimony/perry_m1.htm))])

After Kennedy was pronounced dead, the body was placed into a casket and transported to Dallas Love Field airport, where it was loaded onto Air Force One and flown to Andrews Air Force Base outside of Washington, D. C. The autopsy was performed at Bethesda Naval Hospital in Bethesda, Maryland ([WC, p. 58](<https://www.archives.gov/research/jfk/warren-commission-report/chapter-2.html#removal>)). The lead autopsy pathologist was Dr. James J. Humes, and his two main assistants were Dr. J. Thornton Boswell and forensic pathologist Dr. Pierre Finck.

While the body was still being transported, Dr. Perry appeared at a press conference to discuss the events that transpired. Perry publicly stated that there existed a small bullet wound in the throat below the Adams apple, that it resembled an entrance wound, and that a tracheotomy had been performed

([ARRB MD 41]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md41.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md41.pdf))  
[[text](<http://mcadams.posc.mu.edu/press.htm>)]). Before the autopsy had even started, it was public knowledge that Kennedy had a large wound on the right side of the head and a small wound in the throat. On the same day, Dr. Carrico wrote a hospital report describing the throat wound as resembling a bullet entrance: "*One small penetrating wound of ant. neck in lower 1/3*" ([WC Vol. 21, p. 150] ([https://history-matters.com/archive/jfk/wc/wcvols/wh21/pdf/WH21\\_Price\\_Ex\\_2-35.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh21/pdf/WH21_Price_Ex_2-35.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app8.htm>)]). Perry reportedly said on 11/23/1963 the throat wound was "*only a few mm in size 3-5 mm*" ([WC Vol. 17, p. 29] (<https://www.maryferrell.org/showDoc.html?docId=1134#relPageId=55&tab=page>)). Carrico told the Warren Commission on 3/25/1964 that it was "*probably a 4 to 7 mm wound*" ([WC Vol. 6, p. 1] ([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Carrico.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Carrico.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/carrico2.htm>)]). However, the body was not properly examined at that time.

The pathologists reportedly couldn't find a whole bullet in Kennedy's body, only shrapnel in the head area. Contrary to the staff at Parkland Hospital who said the throat wound resembled a bullet ENTRANCE, the pathologists officially concluded that a bullet entered the upper back and EXITED the throat. The official autopsy protocol, submitted on 11/24/1963, described a small wound in the back, as well as the trach incision in the throat:

>Situated on the upper right posterior thorax just above the upper border of the scapula there is a 7 x 4 millimeter oval wound. This wound is measured to be 14 cm. from the tip of the right acromion process and 14 cm. below the tip of the right mastoid process.

>Situated in the low anterior neck at approximately the level of the third and fourth tracheal rings is a 6.5 cm. long transverse wound with widely gaping irregular edges. (The depth and character of these wounds will be further described below.)

[...]

>2 . The second wound presumably of entry is that described above in the upper right posterior thorax. Beneath the skin there is ecchymosis of subcutaneous tissue and musculature. The missile path through the fascia and musculature cannot be easily probed.

>The wound presumably of exit was that described by Dr. Malcolm Perry of Dallas in the low anterior cervical region. When observed by Dr. Perry the wound measured "a few millimeters in diameter", however it was extended as a tracheostomy incision and thus its character is distorted at the time of autopsy.

The protocol stated it's basic conclusions:

>Summary

>Based on the above observations it is our opinion that the deceased died as a result of two perforating gunshot wounds inflicted by high velocity projectiles fired by a person or persons unknown. The projectiles were fired from a point behind and somewhat above the level of the deceased. The observations and available information do not permit a satisfactory estimate as to the sequence of the two wounds.

[...]

>The other missile entered the right superior posterior thorax above the scapula and traversed the soft tissues of the supra-scapular and the supra-clavicular portions of the base of the right side of the neck. This missile produced contusions of the right apical parietal pleura and of the apical portion of the right upper lobe of the lung. The missile contused the strap muscles of the right side of the neck, damaged the trachea and made its exit through the anterior surface of the neck. As far as can be ascertained this missile struck no bony structures in its path through the body.

([WC D 77](<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=4&tab=page>) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>)])

<https://drive.google.com/open?id=14d-TrTWpfhID1Tl8AP0SHnTS793dtFSj> (NSFW) - Leaked versions of the official autopsy photographs showing the back wound

<https://drive.google.com/open?id=1oBvb0A9Sqge-mJVUMxtvt8bsemRTlh5Y> (NSFW) - Photos showing the incision in the throat

<https://i.imgur.com/CVyzT7a.jpg> - Commission Exhibit 385, the drawing by medical illustrator Harold Rydberg used to demonstrate the proposed bullet path through Kennedy's torso ([WC Vol. 16, p. 977] ([https://www.history-matters.com/archive/jfk/wc/wcvols/wh16/pdf/WH16\\_CE\\_385.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh16/pdf/WH16_CE_385.pdf)))

<https://i.imgur.com/fxzGGOP.png> - The autopsy face sheet diagram, marked during the body examination ([ARRB MD 1]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md1.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md1.pdf)))

A tissue sample was taken of the skin surrounding the back wound. No sample was reportedly taken from the throat wound. From the 12/6/1963 Supplementary Autopsy Report:

>Skin Wounds

>Sections through the wounds in the occipital and upper right posterior thoracic regions are essentially similar.

>In each there is loss of continuity of the epidermis with coagulation necrosis of the tissues at the wound margins. [...]

([WC Vol. 16, p. 987]

([https://history-matters.com/archive/jfk/wc/wcvols/wh16/pdf/WH16\\_CE\\_391.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh16/pdf/WH16_CE_391.pdf)) [[text]

(<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>))

Coagulation necrosis, or coagulative necrosis, is considered very strong physical evidence of a bullet entrance wound ([J Forensic Leg Med. 2014 Jul;25:49-52, \*Histopathological detection of entry and exit holes in human skin wounds caused by firearms\* by Baptista MV, d'Ávila SC, and d'Ávila AM] (<https://www.ncbi.nlm.nih.gov/pubmed/24931861>)).

Years after the time of the Warren Commission, the pathologists claimed on a few occasions that an abrasion collar was observed on the back wound ([Dr. Finck's testimony at the trial of Clay Shaw, 2/24-25/1969](<http://www.aarclibrary.org/publib/jfk/garr/trial/pdf/Feb24.pdf>) [[text]

(<http://mcadams.posc.mu.edu/russ/testimony/finckshaw.htm>)]; [ARRB MD 19, p. 6-8, HSCA report on a 8/10/1977 interview with Dr. Humes]

([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md19.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md19.pdf)) [[text]

(<http://www.kenrahn.com/Marsh/Autopsy/2070.TXT>); [JAMA, 5/27/1992]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md22.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md22.pdf)) [[text]

(<http://the-puzzle-palace.com/jama.htm>)]; [Boswell's ARRB deposition, 2/26/1996]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Boswell\\_2-26-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Boswell_2-26-96.pdf)) [[text]

(<http://mcadams.posc.mu.edu/russ/testimony/boswella.htm>)). A well-known characteristic of entrance wounds, an abrasion collar (or "abrasion ring") is the area of blemished or missing skin around a gunshot wound caused by the friction the projectile moving at an angle. Not all entrance wounds have abrasion collars, and a similar phenomenon can occur with exit wounds – in those cases called "shored exit wounds" (*\*Gunshot Wounds: Practical Aspects of Firearms, Ballistics, and Forensic Techniques\** by Vincent J.M. DiMaio).

The pathologists reportedly observed some bruising on the [strap muscles]

([https://en.wikipedia.org/wiki/Infrahyoid\\_muscles](https://en.wikipedia.org/wiki/Infrahyoid_muscles)) next to the trachea, as well as bruising on the right lung and [pleural cavity]([https://en.wikipedia.org/wiki/Pleural\\_cavity](https://en.wikipedia.org/wiki/Pleural_cavity)). From the autopsy protocol:

>[...] there is considerable ecchymosis of the strap muscles of the right side of the neck and of the fascia about the trachea adjacent to the line of the tracheostomy wound. The third point of reference in connecting these two wounds is in the apex (supra-clavicular portion) of the right pleural cavity. In this region there is contusion of the parietal pleura and of the extreme apical portion of the right upper lobe of the lung. In both instances the diameter of contusion and ecchymosis at the point of maximal involvement measures 5 cm. Both the visceral and parietal pleura are intact overlying these areas of trauma.

>INCISIONS:

>The scalp wounds are extended in the coronal plane to examine the cranial content and the customary (Y) shaped incision is used to examine the body cavities.

[...]

>Lungs

>The lungs are of essentially similar appearance the right weighing 320 Gm., the left 290 Gm. The lungs are well aerated with smooth glistening pleural surfaces and gray-pink color. A 5 cm. diameter area of purplish red discoloration and increased firmness to palpation is situated in the apical portion of the right upper lobe. This corresponds to the similar area described in the overlying parietal pleura. Incision in this region reveals recent hemorrhage into pulmonary parenchyma.

([WC D 77](<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=3&tab=page>) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>)])

A tissue sample of the right lung is further described in the supplementary report:

>MICROSCOPIC EXAMINATION

[...]

>Lungs

>Sections through the grossly described area of contusion in the right upper lobe exhibit disruption of alveolar walls and recent hemorrhage into alveoli. Sections are otherwise essentially unremarkable.

([WC Vol. 16, p. 987] ([https://history-matters.com/archive/jfk/wc/wcvols/wh16/pdf/WH16\\_CE\\_391.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh16/pdf/WH16_CE_391.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>)])

From the 3/16/1964 Warren Commission testimony of Dr. Humes:

>To complete the examination of the area of the neck and the chest, I will do that together, we made the customary incision which we use in a routine postmortem examination which is a Y-shaped incision from the shoulders over the lower portion of the breastbone and over to the opposite shoulder and reflected the skin and tissues from the anterior portion of the chest.

>We examined in the region of this incised surgical wound which was the tracheotomy wound and we saw that there was some bruising of the muscles of the neck in the depths of this wound as well as laceration or defect in the trachea.

>At this point, of course, I am unable to say how much of the defect in the trachea was made by the knife of the surgeon, and how much of the defect was made by the missile wound. That would have to be ascertained from the surgeon who actually did the tracheotomy.

>There was, however, some ecchymosis or contusion, of the muscles of the right anterior neck inferiorly, without, however, any disruption of the muscles or any significant tearing of the muscles.

>The muscles in this area of the body run roughly, as you see as he depicted them here. We have removed some of them for a point I will make in a moment, but it is our opinion that the missile traversed the neck and slid between these muscles and other vital structures with a course in the neck such as the carotid artery, the jugular vein and other structures because there was no massive hemorrhage or other massive injury in this portion of the neck.

>In attempting to relate findings within the President's body to this wound which we had observed low in his neck, we then opened his chest cavity, and we very carefully examined the lining of his chest cavity and both of his lungs. We found that there was, in fact. no defect in the pleural lining of the President's chest.

>It was completely intact.

>However, over the apex of the right pleural cavity, and the pleura now has two layers. It has a parietal or a layer which lines the chest cavity and it has a visceral layer which is intimately in association with the lung.

>As depicted in [figure 385](<https://i.imgur.com/CVyzT7a.jpg>), in the apex of the right pleural cavity there was a bruise or contusion or ecchymosis of the parietal pleura as well as a bruise of the upper portion, the most apical portion of the right lung.

>It, therefore, was our opinion that the missile while not penetrating physically the pleural cavity, as it passed that point bruised either the missile itself, or the force of its passage through the tissues, bruised both the parietal and the visceral pleura.

>The area of discoloration on the apical portion of the right upper lung measured five centimeters in greatest diameter, and was wedge shaped in configuration, with its base toward the top of the chest and its apex down towards the substance of the lung.

[...]

>Commander HUMES - [...] When examining the wounds in the base of the President's neck anteriorly, the region of the tracheotomy performed at Parkland Hospital, we noted and we noted in our record, some contusion and bruising of the muscles of the neck of the President. We noted that at the time of the postmortem examination. Now, we also made note of the types of wounds which I mentioned to you before in this testimony on the chest which were going to be used by the doctors there to place chest tubes. They also made other wounds. one on the left arm, and a wound on the ankle of the President with the idea of administering intravenous. blood and other fluids in hope of replacing the blood which the President had lost from his extensive wounds. Those wounds showed no evidence of bruising or contusion or physical violence, which made us reach the conclusion that they were

performed during the agonal moments of the late president, and when the circulation was, in essence, very seriously embarrassed, if not nonfunctional. So that these wounds, the wound of the chest and the wound of the arm and of the ankle were performed about the same time as the tracheotomy wound because only a very few moments of time elapsed when all this was going on. So, therefore, we reached the conclusion that the damage to these muscles on the anterior neck just below this wound were received at approximately the same time that the wound here on the top of the pleural cavity was, while the President still lived and while his heart and lungs were operating in such a fashion to permit him to have a bruise in the vicinity, because that he did have in these strap muscles in the neck, but he didn't have in the areas of the other incisions that were made at Parkland Hospital. So we feel that, had this missile not made its path in that fashion, the wound made by Doctor Perry in the neck would not have been able to produce, wouldn't have been able to produce, these contusions of the musculature of the neck.

([WC Vol. 2, p. 347]([https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>)])

The organs of the neck are not listed in the autopsy protocol or supplementary report. According to Dr. Finck, the organs of the neck were not removed for preservation ([ARRB MD 28, \*Reports From LtCol Finck to Gen. Blumberg (1/25/65 and 2/1/65)\*]

([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md28.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md28.pdf)); [testimony at the trial of Clay Shaw, 2/24-25/1969](<http://www.aarclibrary.org/publib/jfk/garr/trial/pdf/Feb24.pdf>) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/finckshaw.htm>)].

Finck also said they didn't dissect the wounds in the torso, and that their handling of the body should not be considered a "complete" autopsy by standards of the American Board of Pathology ([Shaw trial testimony, 2/24-25/1969]

(<http://www.aarclibrary.org/publib/jfk/garr/trial/pdf/Feb24.pdf>) [[text]

(<http://mcadams.posc.mu.edu/russ/testimony/finckshaw.htm>); [Resident and Staff Physician, 5/1972, \*Observations based on a review of the autopsy photographs, x-rays, and related materials of the late President John F. Kennedy\* by John Lattimer]

(<https://pdfs.semanticscholar.org/1fa2/bee3d41bc4815f0874d9dd74598ad4fcb55e.pdf>)).

The autopsy was also judged to be inadequate by the twelve-doctor Forensic Pathology Panel of the House Select Committee on Assassinations ([HSCA Vol. 7, p. 181, 3/29/1979, \*Medical Panel Report\*, Part IV.

\*Critique of the earlier examination, with presentation of suggested procedures to be followed in performing an investigation and examination on the remains of a gunshot victim\*)([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M54\\_Critique.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M54_Critique.pdf)) [[text]

(<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7c.htm#crit>)].

There are, however, some statements suggesting the neck organs WERE removed. The 1968 book *\*The Day Kennedy Was Shot\** by Jim Bishop contains the passage "...*Fresh bruises were found on the upper tip of the right pleural area near the bottom of the throat. There were also contusions in the lower neck. Humes called his doctors away from the table and asked the Navy photographer to shoot additional Kodachrome pictures. The lens picked up a bruise in the form of an inverted pyramid. It was a fraction short of two inches across the top, coming to a point at the bottom. A few of the contused*



*neck muscles were removed for further examination\**". Bishop's sources included interviews with the staff from Gawler's funeral home, as well as Secret Service agent William Greer – as written in the book's epilogue section, "...\*William Greer, who drove SS-100-X, has retired from the Secret Service. I visited him at his home in Maryland. His wife was ill and it was not a time to badger a man with ugly memories, but he sat and said: "Go ahead. It will take my mind off other things." The men of Gawler's Sons were discreet and ethical\*...". On 1/12/1977, the HSCA interviewed Gawler's funeral home mortician Tom Robinson. Robinson may have indicated that he saw the neck being dissected, not just the chest. He did say, referring to the trach incision, "...\*those things are done very quickly. By nature of the situation, but it was examined very carefully. The throat was. All that was removed\*".

>Purdy: Tracheotomy. Did you ever hear any discussions that would have indicated why that was the case or what might have caused that, caused obviously the tracheotomy occurred prior to the time the body came there?

>Robinson: Yes, those things are done very quickly. By nature of the situation, but it was examined very carefully. The throat was. All that was removed.

[...]

>Purdy: Did you close up the head, did you help close up other parts of the body as well?

>Robinson: Yes I did.

>Purdy: The back and the front?

>Robinson: I did the front, yes.

>Purdy: Was there much that had to be closed up in the back?

>Robinson: I don't remember that. I don't remember anything happened to really be done when I say in the back where the body had to be turned over.

>Purdy: When they do the autopsy, they basically open the front up all the way and just look around and they don't have to open the back.

>Robinson: ...open him up in the back.

>Conzelman: In the region of the throat, when you were putting him back together, did you notice that any large holes other than what could have been through the autopsy?

>Robinson: The tracheotomy.

>Conzelman: Besides that?

>Robinson: And if it was, a bullet wound.

>Purdy: Could you tell any kind of a path that the wound had taken from looking in there?

>Robinson: No, not really. All that had been removed.

[...]

>Purdy: Let me clear one thing about the back. To what extent if any was that back area opened up? Or was that just all in tact?

>Robinson: No, it was opened up. The brain had to come out

>Purdy: I mean below that wound? In other words the neck and back.

>Robinson: It was well examined I recall.

>Purdy: In the sense of being cut open or being looked at closely?

>Robinson: Yes, I mean looked at and cut.

>Purdy: How big a cut, Where would the cut have gone from and to?

>Robinson: I don't remember if it went off in many angles. It was not a nice clean cut.

>Purdy: So there was a cut open in the neck to look in there.

>Robinson: They had this all cut.

>Purdy: How far down on the back of the neck did they cut open?

>Robinson: That's what's bothering me, I can't recall whether you would say they went into the back or not. I remember seeing the back.

>Purdy: So you had to close up the work they did on the neck.

>Robinson: Yes, it seems to me that Ed did that.

>Purdy: So you don't recall anything

>Robinson: You can't have three needles in the same area, somebody is going to get it.

>Purdy: So you don't recall anything unusual about the closing up, you don't personally or having talked to Mr. Strogle about it?

>Robinson: No.

([ARRB MD 63]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md63.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md63.pdf))  
[[text](<http://www.kenrahn.com/Marsh/Jfk-conspiracy/ROBINSON.TXT>)] [[audio]([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_Robinson.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_Robinson.htm))]).

During a panel discussion on 4/6/1991, the autopsy's laboratory technician James Jenkins said the thyroid was removed.

>Dr. Phillip Williams: Did they take his adrenal glands, do you know?

>Jenkins: Took the adrenals, the testes, the pituitary, the thyroid.

>Paul O'Connor: Right.

>Williams: Alright, then, so if they took the thyroid, then they- they explored this [gesturing towards throat], but at no time did they say that this was a wound?

>Jenkins: Dr. Boswell- the- the manner that we did the post was that we would do- we would open up the cavity, we would tie off the subclavian serenals and so forth. And then, we would extract, en masse, by severing the trach at the highest point that we could actually reach. And then, we take it all out, separate the organs- you know, examine the organs by- according to the technique that that particular doctor, whether he would saw such a heart or whether he would actually open up the heart through the vessels.

([[Video]](<https://www.youtube.com/watch?v=QpmMa10KNHo&>), 5:34))

When interviewed by researcher Harrison Livingstone on 6/16/1991, Jenkins also said the spinal cord was removed. This is relevant to the shooting because a bullet was supposed to have passed near the spine. Jenkin's claim was denied by Dr. Boswell, as well as Dr. Robert Karnei, another autopsy witness. Dr. Humes refused to comment. As summarized in Livingstone's 1992 book *\*High Treason 2\**:

[Chapter 6. *\*The Autopsy: Some Conflicts in the Evidence\**]

[...]

>**\*\*Spinal Cord\*\***

>Jenkins describes removing the spinal cord with a Stryker saw, but Dr. Karnei does not remember it having been removed. When I tried to ask Dr. Humes if it had been removed, he hung up on me.<sup>15</sup> Dr. Boswell told me that the cord was not removed.<sup>16</sup>

>The question of removal and examination of the spinal cord is important because this would tell us if the tuberculosis Kennedy had been exposed to as a child had been reactivated by the steroids he was being given, and only examination of the tissues of the spinal cord would tell this.

>Normally during an autopsy the spinal cord is removed and its condition is reported.

Livingstone [interviewed Dr. Karnei on 8/27/1991](<https://archive.org/stream/nsia-LivingstoneHarrisonEdward/nsia-LivingstoneHarrisonEdward/Livingstone%20Harrison%20Edward%20132#mode/2up>), Dr. Humes on 9/5/1991, and Dr. Boswell 8/7/1991.

[...]

[[Chapter 7. \*Dr. Robert Frederick Karnei\*](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/L%20Disk/Livingstone%20Harrison%20Edward/Item%20083.pdf>)]

[...]

>"Nobody got a look at the spine area?"

>"Not that I remember. I don't remember anybody going into the spinal area to take a look there."

[...]

>"In the end, don't you think they performed a complete and good autopsy?"

>"I think it was as complete as they were allowed to do. I mean, normally they would have gone into the spinal column and taken the spinal cord and all that sort of thing. And they were not allowed to do that. And there was no way they could have looked at the spinal column there to see if there was any disease in the spinal column."

>"They didn't remove the spinal column?"

>"No. No. Not that I can remember. I am almost sure they did not touch the spinal column. [...]"

[...]

>"So the spinal cord was not removed, so there was no opportunity to take tissue samples from it or study whether or not he might have actually had TB of the spine?"

>"No, I don't remember the spinal column ever being touched."

[...]

[Chapter 11. James Curtis Jenkins]

[...]

>Later the spinal cord was removed-a Stryker saw cut both sides of the vertebral column. Jenkins saw Dr. Boswell remove the spinal cord.<sup>12</sup>

>Both Dr. Boswell,<sup>13</sup> and Dr. Robert Karnei, who was present in the autopsy room, deny that the spinal cord was removed. Once again it sounds as though we are talking about two different autopsies.

>Part of the problem of trying to solve a case with so much conflicting evidence is the way people's minds play tricks on them. A lot of the witnesses did not see certain things because they were momentarily out of the room or otherwise occupied, so they will compensate by making certain assumptions in their mind which then become fact. If they think that Robert Kennedy was limiting the

autopsy and they did not see the spinal cord removed, for instance, then they may state that the spinal cord was not removed because Robert did not want it done.

>It is very common under stress for people's minds to imagine that they saw something they did not or to block out the memory of certain events. Jackie K as climbing on the trunk or Nelly Connally going up a flight of stairs.

>I am not suggesting that that is what happened here, and that the spinal cord was in fact removed. I don't know at this point. The cord is not properly mentioned in the autopsy report, whereas normally it would be.

From Livingstone's 1993 book *\*Killing The Truth: Deceit and Deception in the JFK Case\**:

[Appendix J, *\*Encyclopedia of Medical Events And Witness Testimony\** by Harrison E. Livingstone and Katlee Link Fitzgerald]

[...]

### **\*\*SPINAL CORD\*\***

[...]

>Doctor Robert Karnei: The spinal cord was not removed. He was quite strong about this. (Aug. 27, 1991)

>Jim Jenkins: said that later the spinal cord was removed separately-use of Stryker saw but both sides of the vertical column. Jenkins saw Dr. Boswell remove the spinal cord (a: June 6, 1991) Jenkins thinks the brain stem was severed before it arrived at the autopsy because when they removed it from the head, the spinal cord did not come with it. He also said during the same interview that he did not recall removing the spinal cord and that he would have removed it (a: May 29, 1991)

>However, approximately 90% of the time the spinal cord will separate from the brain when the brain is removed.

On 2/26/1996, Dr. Boswell gave his deposition to the Assassination Records Review Board. Strangely, when asked "*\*Were the organs of the neck dissected?\**", he responded "*\*Yes\**".

>Q. Did you ever understand that there were any orders or instructions to limit the autopsy of the organs of the neck?

>A. No.

>Q. Were the organs of the neck dissected?

>A. Yes.

[...]

>Q. Do you see any of the organs of the neck being weighed on Exhibit 1 on the first page?

>A. No, and the only organ in the neck would be the thyroid.

>Q. Do you know whether the thyroid was removed from President Kennedy?

>A. I don't remember that it was. It need not have been necessarily removed. I mean, it could have been examined in situ and not removed. But I do not remember.

>Q. With there being a bullet wound transiting the neck, would it not be standard autopsy procedure to remove all of the organs of the neck?

>A. Normally it would. The trachea, larynx, and everything.

>Q. Do you know whether the trachea, larynx, and thyroid were removed?

>A. I'm almost sure that we did not remove the trachea and larynx. I believe the lungs were removed separately. Normally you would take all the neck organs out with the thoracic organs.

>Q. Did anyone request that the organs of the neck not be removed?

>A. No.

([ARRB, 2/26/1996]([https://www.history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Boswell\\_2-26-96.pdf](https://www.history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Boswell_2-26-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/boswella.htm>)])

### **\*\*Clothing evidence\*\***

After President Kennedy's clothing was removed at Parkland Memorial Hospital, it was given to Secret Service Agent William Greer, the driver of the Presidential Limousine at the time of the shooting ([WC Vol. 2, p. 112]([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Greer.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Greer.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/greer.htm>)]). Afterwards, it came into the possession of the FBI Laboratory in Stafford County, Virginia. ([WC Vol. 5, p. 58] ([https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5\\_Frazier.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5_Frazier.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/frazr2.htm>)]); [WC Vol. 3, p. 390]([https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3\\_Frazier.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3_Frazier.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/frazierb1.htm>)]). The clothing was not examined at the autopsy.

<https://imgur.com/a/alpm7Vi> - Photos showing the small hole in the back of the coat and shirt

<https://imgur.com/a/WeLX6Yp> - Photos showing the defects on the front of the shirt and necktie

The FBI Lab's 11/26/1963 report described one hole in the upper back of the coat, and one hole in the upper back of the shirt:

>Examination of the President's clothing revealed the presence of a small hole in the back of the coat and shirt. The hole in the back of the coat is positioned approximately 5 3/8" below the top of the collar and 1 3/4" to the right of the middle seam. The hole in the shirt back is located in the same relative area, being 5 3/4" below the top of the collar and 1 1/8" to the right of the middle. These holes are typical of bullet entrance holes.

Then there are the defects on the front of the shirt and necktie. The Lab described the defects on the front of the shirt as "ragged slitlike", presenting this as evidence for a projectile exiting at this point:

>A ragged slitlike hole approximately 1/2" in length is located in the front of the shirt 7/8" below the collar button. This hole is through both the button and buttonhole portions of the shirt due to the overlap. This hole has the characteristics of an exit hole for a projectile. [...]

>A small elongated nick was located in the left side of the knot of the tie, Q24, which may have been caused by the projectile after it had passed through the front of the shirt.

([WC D 205, p. 153](<https://www.maryferrell.org/showDoc.html?docId=10672#relPageId=156&tab=page>))

A letter from Assistant Director in charge of the FBI Lab Ivan Conrad to the Lab's Special Agent Roy H. Jevons stated that the defects on the front of the shirt resembled an exit for a bullet FRAGMENT specifically ([FBI 62-109060-1086, JFK HQ File, Section 14] (<https://www.maryferrell.org/showDoc.html?docId=62264#relPageId=85&tab=page>)), despite the later official interpretation of a whole bullet passing by this point.

The Warren Report summarized the clothing evidence as follows: "*The clothing worn by President Kennedy on November 22 had holes and tears which showed that a missile entered the back of his clothing in the vicinity of his lower neck and exited through the front of his shirt immediately behind his tie, nicking the knot of his tie in its forward flight*" ([WC, p. 91, Chapter 3: *The Shots from the Texas School Book Depository*, *The Bullet Wounds*, *The President's Neck Wounds*] (<https://www.archives.gov/research/jfk/warren-commission-report/chapter-3.html#neck>)). But even if the rear defects were an entry and the frontal defects an exit, this does not necessarily mean they were caused by one projectile. Other evidence would be needed to understand how these defects were created.

On 3/23/1964, a letter discussing the clothing evidence was addressed by FBI Director J. Edgar Hoover to Lee Rankin, General Counsel of the Warren Commission. Hoover stated "*\*The hole in the back of the coat and the hole in the back of the shirt were, in general, circular in shape and the ends of the torn threads around the hole were bent inward. These characteristics are typical of bullet entrance holes\**" ([FBI 105-82555-2788, Oswald HQ File, Section 111](<https://www.maryferrell.org/showDoc.html?docId=58231&rel=#relPageId=114&tab=page>)). But the FBI lab's original report on the clothing only stated "*\*These holes are typical of bullet entrance holes\**", not specifying that the fibers around the holes were bent inward.

Robert Frazier discussed the clothing fibers in his 5/13/1964 WC testimony, adding the disclaimer "*\*assuming that when I first examined the shirt it was--it had not been altered from the condition it was in at the time the hole was made\**".

>Mr. SPECTER - Would you refer at this time to the coat, if you please, which, may the record show, has heretofore been marked as [Commission Exhibit 393](<https://www.maryferrell.org/showDoc.html?docId=1134#relPageId=49&tab=page>).

>And by referring to that coat will you describe what, if anything, you observed on the rear side of the coat?

>Mr. FRAZIER - There was located on the rear of the coat 5 3/8 inches below the top of the collar, a hole, further located as 1 3/4 inches to the right of the midline or the seam down the center of the coat; all of these being as you look at the back of the coat.

>Mr. SPECTER - What characteristics did you note, if any, on the nature of that hole?

>Mr. FRAZIER - I noticed that the hole penetrated both the outer and lining areas of the coat, that it was roughly circular in shape. When I first examined it it was approximately one-fourth of an inch in diameter, and the cloth fibers around the margins of the hole were pushed inward at the time I first examined it in the laboratory.

[...]

>Mr. SPECTER - Have you now described all of the characteristics of that hole, which you consider to be important for the Commission's consideration?



>Mr. FRAZIER - Yes, sir.

>Mr. SPECTER - Assuming that those clothes, that jacket, specifically, at this juncture, was worn by President Kennedy, and was in the same condition when that hole was made as it is now, and at the time when you made your examination, do you have a professional opinion as to what caused that hole in the back of the jacket?

>Mr. FRAZIER - Yes, sir; I would say that it was an entrance hole for a bullet.

>Mr. SPECTER - And what is the reason for that conclusion, please?

>Mr. FRAZIER - It has all the physical appearance characteristics which are considered when examining holes, such as its shape, its size, and in particular the fact that the fibers around the margins of the hole were all pushed inward where the cloth was torn by the object which passed through, and the fibers were unraveled as they were pushed inward, which is characteristic of a entrance-type bullet hole.

[...]

>Mr. SPECTER - Can you tell the size of the bullet from the hole in the jacket?

>Mr. FRAZIER - The hole in the jacket is approximately a quarter of an inch in diameter.

>Mr. SPECTER - Would that hole be consistent with a hole which would be caused by a 6.5 millimeter bullet?

>Mr. FRAZIER - Yes, sir; the actual bullet which makes a hole cannot be determined because the cloth in one instance may stretch more than it does in another instance causing either a larger or smaller hole even for the same caliber, but it is consistent for a bullet of 6.5 millimeters in diameter to make a hole of approximately this size.

>Mr. SPECTER - Were there any holes indicative of being bullet holes found on the front part of the President's jacket?

>Mr. FRAZIER - No, sir.

>Mr. SPECTER - Did you have further occasion to examine the President's shirt?

>Mr. FRAZIER - I did.

>Mr. SPECTER - May the record show that the shirt has heretofore been identified as [Commission Exhibit 394]([https://history-matters.com/archive/jfk/wc/wcvols/wh17/html/WH\\_Vol17\\_0025a.htm](https://history-matters.com/archive/jfk/wc/wcvols/wh17/html/WH_Vol17_0025a.htm))?

>The CHAIRMAN - Yes; it may be.

>Mr. SPECTER - What, if anything, did you observe then on the back side of the shirt Mr. Frazier?

>Mr. FRAZIER - I found on the back of the shirt a hole, 5 3/4 inches below the top of the collar, and as you look at the back of the shirt 1 1/8 inch to the right of the midline of the shirt, which is this hole I am indicating.

>Mr. SPECTER - May the record show the witness is examining the shirt, as he has the coat, to indicate the hole to the Commission.

>The CHAIRMAN - The record may show that.

>Mr. FRAZIER - In connection with this hole, I made the same examination as I did on the coat, Exhibit 393. I found the same situation to prevail, that is the hole was approximately circular in shape, about one-fourth inch in diameter, and again the physical shape of it is characteristic of a bullet hole, that is the edges are frayed, and there are slight radial tears in the cloth, which is characteristic of a bullet having passed through the cloth, and further, the fibers around the margin of the hole were--had been pressed inward, and assuming that, when I first examined the shirt it was in the same condition as it was at the time the hole was made, it is my opinion that this hole, in addition, was caused by a bullet entering the shirt from the back at that point.

>Mr. SPECTER - Is that hole consistent with having been caused by a 6.5 millimeter bullet?

>Mr. FRAZIER - Yes; it is.

>Mr. SPECTER - With respect to the front side of the shirt, what, if any, hole did you find there?

>Mr. FRAZIER - Only one hole.

>Mr. DULLES - May I ask one question there?

>Mr. FRAZIER - Yes; certainly.

>Mr. DULLES - Is the hole in the shirt and the hole in the coat you have just described in a position that indicates that the same instrument, whatever it was, or the same bullet made the two?

>Mr. FRAZIER - Yes; they are. They are both--the coat hole is  $5 \frac{3}{8}$  inches below the top of the collar. The shirt hole is  $5 \frac{3}{4}$  inches, which could be accounted for by a portion of the collar sticking up above the coat about a half inch.

>Mr. DULLES - I see.

>Mr. FRAZIER - And they are both located approximately the same distance to the right of the midline of both garments.

>Now, on the front of the shirt, I found what amounts to one hole. Actually, it is a hole through both the button line of the shirt and the buttonhole line which overlap down the front of the shirt when it is buttoned.

>Mr. SPECTER - Proceed.

>Mr. FRAZIER - This hole is located immediately below the button being centered seven-eighths of an inch below the button on the shirt, and similarly seven-eighths of an inch below the buttonhole on the opposite side.

>The CHAIRMAN - You are speaking of the collar button itself, aren't you?

>Mr. FRAZIER - The collar button.

>The CHAIRMAN - Yes.

>Mr. FRAZIER - In each instance for these holes, the one through the button line and the one through the buttonhole line, the hole amounts to a ragged slit approximately one-half inch in height. It is oriented vertically, and the fibers of the cloth are protruding outward, that is, have been pushed from the inside out. I could not actually determine from the characteristics of the hole whether or not it was caused by a bullet. However, I can say that it was caused by a projectile of some type which exited from the shirt at that point and that is again assuming that when I first examined the shirt it was--it had not been altered from the condition it was in at the time the hole was made.

>Mr. SPECTER - What characteristics differ between the hole in the rear of the shirt and the holes in the front of the shirt which lead you to conclude that the hole in the rear of the shirt was caused by a bullet but which are absent as to the holes in the front of the shirt?

>Mr. FRAZIER - The hole in the front of the shirt does not have the round characteristic shape caused by a round bullet entering cloth. It is an irregular slit. It could have been caused by a round bullet, however, since the cloth could have torn in a long slitlike way as the bullet passed through it. But that is not specifically characteristic of a bullethole to the extent that you could say it was to the exclusion of being a piece of bone or some other type of projectile.

>Mr. SPECTER - Have you now described all of the characteristics of the front of the shirt holes which you consider to be important?

>Mr. FRAZIER - Yes, sir.

>Mr. DULLES - Could I ask one question there. If the bullet, after entering, hit something that made it tumble or change, would that account for this change in the appearance of the exit through the shirt?

>Mr. FRAZIER - I think not. In my opinion it would not have been necessary, if I may put it that way, for the bullet to have turned sideways or partially sideways in order to make an elongated hole.

>Mr. DULLES - I see.

>Mr. FRAZIER - I think the effect in the front of the shirt is due more to the strength of the material being more in the horizontal rather than the vertical direction which caused the cloth to tear vertically rather than due to a change in the shape or size of the bullet or projectile.

>Mr. DULLES - Or possibly the velocity of the bullet at that place, would that have anything to do with it?

>Mr. FRAZIER - I think the hole would not have been affected unless it was a very large change in velocity.

([WC Vol. 5, p. 58]([https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5\\_Frazier.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5_Frazier.pdf))  
[[text](<http://mcadams.posc.mu.edu/russ/testimony/frazr2.htm>)])

The Forensic Pathology Panel of the House Select Committee on Assassinations acknowledged that, by fifteen years later, the clothing fibers were probably useless as evidence to their own investigators:

"\**The panel itself cannot assess evidentiary significance to the fiber direction because of the numerous intervening examinations*\*" ([HSCA Vol. 7, p. 91, 3/29/1979]

([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M53a\\_Kennedy.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M53a_Kennedy.pdf)) [[text]

(<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7c.htm#kenneck>)]).

The use of clothing fibers to differentiate entrance and exit holes has been described as unreliable. A 2014 article in the journal of the *Association of Firearm and Tool Mark Examiners*\* (AFTE) reads "*The fact that such protruding fibers can be, and often are present around the margin of an entry bullet hole in cloth or clothing is counter-intuitive. Relying on the direction of such protruding fibers as a determinant of the direction of bullet travel in the absence of other critically important information is clearly ill-advised and can result in a serious error*" ([\*Bullet Entry Holes in Fabric: Fibers, Facts, and Fallacies\* by Alexander Jason and Lucien Haag]

([https://static1.squarespace.com/static/54ac8901e4b0cf1d82a548c7/t/54d2dbbee4b01d2175605c8f/1423104958569/AFTE+-+Entry+Holes+Paper\\_Jason%26Haag.pdf](https://static1.squarespace.com/static/54ac8901e4b0cf1d82a548c7/t/54d2dbbee4b01d2175605c8f/1423104958569/AFTE+-+Entry+Holes+Paper_Jason%26Haag.pdf))).

Metallic residue was also identified around the hole on the back of the coat and shirt. According to FBI reports ([WC D 205, p. 153, 12/23/1963](<https://www.maryferrell.org/showDoc.html?docId=10672#relPageId=156&tab=page>); [WC D 107, p. 2]

(<https://www.maryferrell.org/showDoc.html?docId=10507#relPageId=8&tab=page>)) and Frazier's 5/13/1963 WC testimony, spectrographic analysis showed trace amounts of copper around the edges of the coat/shirt back holes. This residue was reportedly NOT found on the front of the shirt or necktie.

>Mr. SPECTER - Did any tests conducted on the coat disclose any metallic substance on that area of that hole?

>Mr. FRAZIER - Yes, sir. I had a spectrographer run an analysis of a portion of the hole which accounts for its being slightly enlarged at the present time. He took a sample of cloth and made an analysis of it. I don't know actually whether I am expected to give the results of his analysis or not.

>Mr. SPECTER - Yes; would you please, or let me ask you first of all, were those tests run by the Federal Bureau of Investigation in the regular course of its testing procedures?

>Mr. FRAZIER - Yes, sir; they were.

>Mr. SPECTER - And have those results been made available to you through the regular recordkeeping procedures of the FBI?

>Mr. FRAZIER - Yes, sir.

>Mr. SPECTER - Would you then please tell us what those tests disclose?

>Mr. FRAZIER - Traces of copper were found around the margins of the hole in the back of the coat, and as a control, a very small section under the collar was taken, and no copper being found there, it was concluded that the copper was foreign to the coat itself.

[...]

>Mr. SPECTER - Is the presence of the metallic substance relevant in your conclusion that it was a bullet hole?

>Mr. FRAZIER - Not necessarily. It is a factor which corroborates that opinion but even without it, it would still have been my opinion that it was a bullet entrance hole.

[...]

>Mr. FRAZIER - [...] there was no metallic residue found on the tie, and for that matter there was no metallic residue found on the shirt at the holes in the front. However, there was in the back.

[...]

>Mr. DULLES - Excuse me, on the back of the coat?

>Mr. FRAZIER - The shirt.

>Mr. DULLES - Back of the coat and on the shirt?

>Mr. FRAZIER - Yes, sir.

([WC Vol. 5, p. 58]([https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5\\_Frazier.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5_Frazier.pdf))  
[[text](<http://mcadams.posc.mu.edu/russ/testimony/frazr2.htm>)])

Years later, the House Select Committee on Assassinations had the clothing re-examined. As reported by the Southwestern Institute of Forensic Sciences in Dallas, Texas:

>In regard to J.F.K. clothing: At the periphery of the defect in the back of the shirt some very tiny particles of foreign material are seen on the SX film, but no copper or lead were found by EDX. On the coat in the area of the defect and on the shirt in the area of the right front defect, the EDX gave a borderline count for copper. Iron, apparently from the blood stain was detected about the defect in the coat.

Numerical results: <https://i.imgur.com/XfbFpOZ.png>

([HSCA Vol. 7, p. 231, Addendum F, *\*Report on the soft X-ray and energy dispersion X-ray analysis of the clothing of John F. Kennedy and John B. Connally, prepared by South-western institute of Forensic Sciences, Dallas, Tex, dated Feb. 1, 1978\**]

([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59F\\_Clothing.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M59F_Clothing.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7d.htm>)]]

There is no remaining evidence on the coat or shirt for the copper residue originally reported by the FBI.

### **\*\*Pre-autopsy witnesses to the back wound\*\***

The staff at Parkland Memorial Hospital did not report seeing the wound in Kennedy's back which was spotted during the autopsy at Bethesda Naval Hospital.

As explained by the Warren Report, "*Since the Dallas doctors directed all their efforts to controlling the massive bleeding caused by the head wound, and to reconstructing an airway to his lungs, the President remained on his back throughout his medical treatment at Parkland\**" ([WC, p. 55, Chapter 2: *\*The Assassination, Treatment of President Kennedy\**]

(<https://www.archives.gov/research/jfk/warren-commission-report/chapter-2.html#treatment>)). But even if the body was not turned over during the attempted resuscitation, Nurses Diana Bowron and Margaret Henchcliffe described washing the body and wrapping it in sheets before it was placed in its casket ([WC Vol. 21, p. 203, Bowron's hospital report](<https://www.maryferrell.org/showDoc.html?docId=1138#relPageId=227&tab=page>); [WC Vol. 6, p. 134, Bowron's WC testimony, 5/24/1964] ([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Bowron.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Bowron.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/bowron.htm>)]]; ([WC Vol. 6, p. 139, Henchcliffe's WC testimony, 3/21/1964]([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Henchcliffe.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Henchcliffe.pdf)) [[text](<http://jfkassassination.net/russ/testimony/henchlif.htm>)])). Reports show at least three other witnesses may have seen the body being handled at this time - Nurse Patricia Hutton, Nurse Doris Nelson, and orderly David Sanders ([WC Vol. 21, p. 150, CE 392, *\*Medical reports from doctors at Parkland Hospital, Dallas, Tex., concerning treatment of President Kennedy at that hospital on November 22, 1963\**]([https://history-matters.com/archive/jfk/wc/wcvols/wh21/pdf/WH21\\_Price\\_Ex\\_2-35.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh21/pdf/WH21_Price_Ex_2-35.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/app8.htm>)]]; [WC Vol. 6, p. 143, Nelson's WC testimony, 3/20/1964]([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Nelson.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Nelson.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/nelson.htm>)]]).

When Parkland Hospital's Dr. Marion Jenkins was later interviewed by researcher John Lattimer, he claimed to remember feeling a wound in the back with his finger while lifting up the body (Lattimer, *\*Kennedy and Lincoln: Medical and Ballistic Comparisons of Their Assassinations\**, 1980, p. 153). Jenkins did not mention this when testifying to the Warren Commission on 3/25/1964 ([WC Vol. 6, p.

45]([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Jenkins.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Jenkins.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/jenkins.htm>)]).

When Nurse Diana Bowron was interviewed by researcher Harrison Livingstone, she claimed to remember seeing a back wound while washing the body (Livingstone, *Killing The Truth: Deceit and Deception in the JFK Case*, 1993, Chapter 6: *Diana Bowron*\*; Interviewed by Livingstone 1/8/1993, 3/15/1993, 5/2/1993, Corresponded 4/25/1993 and 5/11/1993). However, Bowron did not mention a wound in the back she testified to the Warren Commission on 3/24/1964, and when asked "*Did you notice any other wound on the President's body?*"\*, she replied "*No, sir*"\* ([WC Vol. 6, p. 134] ([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Bowron.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Bowron.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/bowron.htm>)]).

The lack of any other back wound sighting from Parkland has led to some speculation that there originally was no back wound, and that all evidence of a back wound from the autopsy and clothing was somehow faked. Dr. Malcolm Perry, who performed the tracheotomy, told the Warren Commission that lead autopsy pathologist Dr. James Humes asked him over the phone "*if we had made any wounds in the back. I told him that I had not examined the back nor had I knowledge of any wounds of the back*"\* ([WC Vol. 6, p. 7, 3/25/1964 testimony](<https://www.maryferrell.org/showDoc.html?docId=35#relPageId=17&tab=page>) [[text]([http://jfkassassination.net/russ/testimony/perry\\_m2.htm](http://jfkassassination.net/russ/testimony/perry_m2.htm))]). This would be a strange question to ask if the back wound was unquestionably made by a bullet.

In 1965, the autopsy's assisting forensic pathologist Dr. Pierre Finck addressed a report to his superior General Joseph Blumberg. One passage includes the out-of-place phrase "black fouling": "...*In my opinion, the oval wound in the right posterior superior aspect of the chest of Kennedy was an ENTRY. The edges were fairly regular and there was black fouling of the edges*"\* ([ARRB MD 28] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md28.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md28.pdf))). According to scientific literature on gunshot wounds, "fouling" refers to the residue of burned gunpowder and soot spread from the discharge of a firearm at very CLOSE RANGE ([JCLC, 1948] (<https://scholarlycommons.law.northwestern.edu/cgi/viewcontent.cgi?article=3614&context=jclc>); [AJCP, 1953](<https://academic.oup.com/ajcp/article-abstract/23/8/758/1767582>); [CSLR, 1964] (<https://engagedscholarship.csuohio.edu/cgi/viewcontent.cgi?referer=https://www.google.com/&httpsredir=1&article=3163&context=clevstrev>); [AJCP, 1969] (<https://academic.oup.com/ajcp/article-abstract/52/3/277/1769562?redirectedFrom=fulltext>)). Officially, Finck's reference to "black fouling of the edges" can only be interpreted as a mistake.

There is one interesting witness in regards to the hole in the back of Kennedy's coat. Glen Bennett was the Secret Service Agent seated in the right rear of the car following behind the Presidential Limousine. Bennett claimed that he literally saw a bullet hole punch through the back of Kennedy's coat at the time of the shooting.

From Bennett's handwritten notes, dated 5:30 PM 11/22/1963:



>The President's auto moved down a slight grade and the crowd was very sparse. At this point I heard a noise that immediately reminded me of a firecracker. I immediately, upon hearing the supposed firecracker, looked at the Boss's car. At this exact time I saw a shot that hit the Boss about 4 inches down from the right shoulder; a second shot followed immediately and hit the right rear high of the Boss's head.

([WC Vol. 24, p. 541](<https://www.maryferrell.org/showDoc.html?docId=1140#relPageId=559&tab=page>))

From a 11/23/1964 formal statement by Bennett:

>About thirty minutes after leaving Love Field, about 12:25 P.M., the motorcade entered an intersection and then proceeded down a grade. At this point, the well-wishers numbered but a few; the motorcade continued down this grade en route to the Trade Mart. At this point, I heard what sounded like a firecracker. I immediately looked from the right/crowd/physical area/ and looked towards the President who was seated in the right rear seat of his limousine open convertible. At the moment I looked at the back of the President I heard another firecracker noise and saw the shot hit the President about four inches down from the right shoulder. A second shot followed immediately and hit the right rear high of the President's head.

([WC Vol. 18, p.760](<https://www.maryferrell.org/showDoc.html?docId=1135#relPageId=774&tab=page>))

The Warren Report explained the significance of this allegation:

>Substantial weight may be given Bennett's observations. Although his formal statement was dated November 23, 1963, his notes indicate that he recorded what he saw and heard at 5:30 p.m., November 22, 1963, on the airplane en route back to Washington, prior to the autopsy, when it was not yet known that the President had been hit in the back.<sup>338</sup> It is possible, of course, that Bennett did not observe the hole in the President's back, which might have been there immediately after the first noise.

([WC, p. 111, Chapter 3: *\*The Shots from the Texas School Book Depository\**, *\*The Shot that Missed\**, *\*The First Shot\**](<https://www.archives.gov/research/jfk/warren-commission-report/chapter-3.html#firstmissed>))

On 1/30/1978, Bennett was interviewed by the House Select Committee on Assassinations. As reported, *"\*He remembers hearing what he hoped was a firecracker. He then heard another noise and saw what appeared to be a nick in the back of President Kennedy's coat below the shoulder. He thought the President had been hit in the back. Bennett stated that he does not recall any agents reacting before the third shot\*"* ([HSCA 180-10082-10452]([http://the-puzzle-palace.com/files/arrb\\_tenth2.html](http://the-puzzle-palace.com/files/arrb_tenth2.html))).

There are some serious problems with Bennett's story. The pictures taken in Dealey Plaza show that he was about 50 feet away from the Presidential Limousine when the shooting started. As researcher David Lifton asked, *"\*Could a person see a bullet strike dark clothing at about fifty feet?"\**. If Bennett was not telling the truth, this could possibly reveal an attempt to manufacture witness evidence (Lifton,

\*Best Evidence: Disguise and Deception in the Assassination of John F. Kennedy\*, 1980, Part III. \*A Search For New Evidence\*, Chapter 11. \*The Tracheotomy Incision: Dallas vs. Bethesda\*). Even lone-gunman author David Von Pein said in a [2018 online discussion]

(<https://educationforum.ipbhost.com/topic/25200-i-was-a-teenage-jfk-conspiracy-freak/?page=42&tab=comments#comment-387126>) "*That type of vision is reserved for a guy named Superman. Anyway, do you think Bennett had a tape measure with him when he estimated where the bullet entered the President's back?*".

Two photographs taken in Dealey Plaza at the time of the shooting show Bennett's head turned sharply to the right, not turned towards the direction of Kennedy ([PatSpeer.com, \*A New Perspective on the Kennedy Assassination\* by Pat Speer, Chapter 5b: \*Primary Pieces\*, \*Isolating Bennett\*] (<http://www.patspeer.com/chapter5b%3Aprimarypieces>)). First, there is [Willis photo #5] (<https://www.jfkassassinationgallery.com/displayimage.php?pid=12520&fullsize=1>), synchronous with frame 202 of the [Zapruder Film](<https://www.youtube.com/watch?v=iU83R7rpXQY>) ([Richard E. Sprague, 10/15/1967](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/S%20Disk/Sprague%20Richard%20E%20Monographs/Item%2003.pdf>); [Don Olson and Ralph F. Turner, October 1971](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/J%20Disk/Journal%20of%20Forensic%20Science/Item%2001.pdf>); [HSCA Vol. 6, p. 121] ([https://history-matters.com/archive/jfk/hasca/reportvols/vol6/pdf/HSCA\\_Vol6\\_4A\\_Gunmen.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol6/pdf/HSCA_Vol6_4A_Gunmen.pdf))). Second, there is [Altgens photo #6](<http://content.invisioncic.com/r16296/post-5199-074941900%201294964243.jpg>), synchronous with z255 ([WC, p. 255] (<https://www.archives.gov/research/jfk/warren-commission-report/chapter-3.html>); [WC Vol. 5, p. 138] ([https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5\\_Shaneyfelt.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5_Shaneyfelt.pdf)); [HSCA Vol. 6, p. 318]([https://history-matters.com/archive/jfk/hasca/reportvols/vol6/pdf/HSCA\\_Vol6\\_6\\_References.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol6/pdf/HSCA_Vol6_6_References.pdf))).

<https://i.imgur.com/6lRULzv.jpg> - Willis photo #5, with President Kennedy and Agent Bennett circled. Also notice how Kennedy's back is enveloped in dark shadows, making it even more doubtful that Bennett saw what he claimed.

<https://i.imgur.com/v4KWioX.jpg> - Altgens photo #6. Kennedy's hands are raised towards his neck, while Bennett's head is turned as it is in the Willis photo.

The [Zapruder Film](<https://www.youtube.com/watch?v=iU83R7rpXQY>) shows Kennedy starting to raise his arms by the z220's. This body language is officially explained by one bullet entering the back and exiting the throat. If Bennett's head remained turned between the time of the Willis and Altgens photographs, then it is doubtful that he could've seen the bullet hole punch through the back of Kennedy's coat. The Zapruder Film reportedly runs at 18.3 frames per second ([WC, p. 97] (<https://www.archives.gov/research/jfk/warren-commission-report/chapter-3.html>); [WC Vol. 5, p. 135]

([https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5\\_Gauthier.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5_Gauthier.pdf)); [WC Vol. 5, p. 138] ([https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5\\_Shaneyfelt.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5_Shaneyfelt.pdf))), so there was about a 3-second span between the Willis and Altgens photos.

On the other hand, if Bennett's statements were true and honest, they still bring the official story into question. Anybody proposing a lone gunman must explain what happened to the first shot fired: either it missed, or it successfully entered Kennedy's back ([Warren Report, Chapter 3: \*The Shots from the Texas School Book Depository\*, \*Number of Shots\*](<https://www.archives.gov/research/jfk/warren-commission-report/chapter-3.html#number>)). Bennett's statements could only be reconciled with the official version by proposing the first shot missed. This limits the possibilities for a lone gunman scenario to be argued. There is another possibility to consider: what if Bennett saw the back shot AFTER Kennedy raised his hands towards his neck? If the back wound was created after the throat wound, this would nullify the official story.

Then there are the questionable statements from Roy Kellerman, the Secret Service Agent seated in the front passenger side of the Presidential Limousine. Kellerman claimed to have heard President Kennedy say something after the first loud gunshot. While Kellerman was waiting in the morgue at Bethesda Naval Hospital during the autopsy, he had a conversation with two attending FBI Agents, James Sibert and Francis X. O'Neill. Sibert and O'Neill relayed Kellerman's story in a report:

>He advised he heard a shot and immediately turned around, looking at Governor Connally, who was seated directly in back of him, to the President. He observed the President slum forward and heard him say, "Get me to a hospital." Mr. Kellerman then heard Mrs. Kennedy say, "Oh, no!", as the President leaned toward her. He immediately advised the driver to take the President to the nearest hospital [...]

([WC D 7, p. 3](<https://www.maryferrell.org/showDoc.html?docId=10408&relPageId=7&>))

On 11/27/1963, Sibert and O'Neill interviewed Kellerman again. As reported:

>KELLERMAN said he heard a noise like a firecracker.

>At this point, KELLERMAN advised he had been in almost daily contact for the past three years, with the President, and said he could pick his voice out from any group of people.

>Upon hearing a noise like firecracker, he distinctly and positively heard the President say "My God, I've been hit". KELLERMAN advised he immediately turned his head to the left rear and almost instantaneously heard two additional shots.

>Upon turning his head to the left, he observed President Kennedy with his left hand in back of him appearing to be reaching to a point on his right shoulder, the President fell on Mrs. Kennedy's lap. She stated "my God, what are they doing to you?" Governor Connally never said a word. Through the corner of his eye, he noticed that Governor Connally appeared to be falling back face up in the lap of his wife. KELLERMAN stated he immediately turned around and advised Mr. Greer, "Get going, we've been hit."

([WC D 7, p. 7](<https://www.maryferrell.org/showDoc.html?docId=10408&relPageId=11>))

Did Kellerman hear "*Get me to a hospital*" or "*My God, I've been hit*"? Either way, it would have been impossible for President Kennedy to speak if a bullet had just passed through his trachea. According to the official story, Kellerman must be wrong.

From Kellerman's own statement, dated 11/29/1963:

>[...] We were still traveling at the normal rate of speed of from 12 to 15 miles per hour when I heard a noise, similar to a firecracker, exploding in the area to the rear of the car, about 12:30 pm.

>Immediately I heard what I firmly believe was the President's voice, "My God, I'm hit!" I turned around to find out what happened when two additional shots rang out, and the President slumped into Mrs. Kennedy's lap and Governor Connally fell to Mrs. Connally's lap. I heard Mrs. Kennedy shout, "What are they doing to you?"

>I yelled at William Greer (the driver) to "Step on it, we're hit!" and grabbed the mike from the car radio, called to SA Lawson in the police lead car that we were hit and to get us to a hospital.

([WC Vol. 18 724]([https://www.history-matters.com/archive/jfk/wc/wcvols/wh18/pdf/WH18\\_CE\\_1024.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh18/pdf/WH18_CE_1024.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/sa-kelle.htm>)])

From Kellerman's 3/9/1964 testimony to the Warren Commission:

>Mr. KELLERMAN. As we turned off Houston onto Elm and made the short little dip to the left going down grade, as I said, we were away from buildings, and there was a sign on the side of the road which I don't recall what it was or what it said, but we no more than passed that and you are out in the open, and there is a report like a firecracker, pop. And I turned my head to the right because whatever this noise was I was sure that it came from the right and perhaps into the rear, and as I turned my head to the right to view whatever it was or see whatever it was, I heard a voice from the back seat and I firmly believe it was the President's, "My God, I am hit," and I turned around and he has got his hands up here like this.

>Mr. SPECTER. Indicating right hand up toward his neck?

>Mr. KELLERMAN. That is right, sir. In fact, both hands were up in that direction.

>Senator COOPER. Which side of his neck?

>Mr. KELLERMAN. Beg pardon?

>Senator COOPER. Which side of his neck?

>Mr. KELLERMAN. Both hands were up, sir; this one is like this here and here we are with the hands--

>Mr. SPECTER. Indicating the left hand is up above the head.

>Mr. KELLERMAN. In the collar section.

>Mr. SPECTER. As you are positioning yourself in the witness chair, your right hand is up with the finger at the ear level as if clutching from the right of the head; would that be an accurate description of the position you pictured there?

>Mr. KELLERMAN. Yes. Good. There was enough for me to verify that the man was hit. So, in the same motion I come right back and grabbed the speaker and said to the driver, "Let's get out of here; we are hit," and grabbed the mike and I said, "Lawson, this is Kellerman,"--this is Lawson, who is in the front car. "We are hit; get us to the hospital immediately." Now, in the seconds that I talked just

now, a flurry of shells come into the car. I then looked back and this time Mr. Hill, who was riding on the left front bumper of our followup car, was on the back trunk of that car; the President was sideways down into the back seat.

[...]

>Mr. KELLERMAN. Mr. Congressman, I have driven that car many times, and I never cease to be amazed even to this day with the weight of the automobile plus the power that is under the hood; we just literally jumped out of the God-damn road.

>Representative FORD. As soon as this noise was heard, or as soon as you transmitted this message to Lawson?

>Mr. KELLERMAN. As soon as I transmitted to the driver first as I went to Lawson. I just leaned sideways to, him and said, "Let's get out of here. We are hit."

>Representative FORD. That comment was made to Greer; not to Lawson?

>Mr. KELLERMAN. Yes, sir; that is right.

>Representative FORD. And the subsequent message was to Lawson?

>Mr. KELLERMAN. Correct. That is right.

>Mr. SPECTER. With relationship to that first noise that you have described, when did you hear the voice?

>Mr. KELLERMAN. His voice?

>Mr. SPECTER. We will start with his voice.

>Mr. KELLERMAN. Ok. From the noise of which I was in the process of turning to determine where it was or what it was, it carried on right then. Why I am so positive, gentlemen, that it was his voice there is only one man in that back seat that was from Boston, and the accents carried very clearly.

>Mr. SPECTER. Well, had you become familiar with the President's voice prior to that day?

>Mr. KELLERMAN. Yes; very much so.

>Mr. SPECTER. And what was the basis for your becoming familiar with his voice prior to that day?

>Mr. KELLERMAN. I had been with him for 3 years.

>Mr. SPECTER. And had you talked with him on a very frequent basis during the course of that association?

>Mr. KELLERMAN. He was a very free man to talk to; yes. He knew most all the men, most everybody who worked in the White House as well as everywhere, and he would call you.

>Mr. SPECTER. And from your experience would you say that you could recognize the voice?

>Mr. KELLERMAN. Very much, sir; I would.

>Mr. SPECTER. Now, I think you may have answered this, but I want to pin-point just when you heard that statement which you have attributed to President Kennedy in relationship to the sound which you described as a firecracker.

>Mr. KELLERMAN. This noise which I attribute as a firecracker, when this occurred and I am in the process of determining where it comes because I am sure it came off my right rear somewhere; the voice broke in right then.

>Mr. SPECTER. At about the same time?

>Mr. KELLERMAN. That is correct, sir. That is right.

>Mr. SPECTER. Now, did President Kennedy say anything beside, "My God, I am hit."

>Mr. KELLERMAN. That is the last words he said, sir.

>Mr. SPECTER. Did Mrs. Kennedy say anything at that specific time?

>Mr. KELLERMAN. Mr. Specter, there was an awful lot of confusion in that back seat. She did a lot of talking which I can't recall all the phrases.

>Mr. SPECTER. Well, pinpoint--

>Mr. KELLERMAN. But after the flurry of shots, I recall her saying, "What are they doing to you?" Now again, of course, my comparison of the voice of her speech--certainly, I have heard it many times, and in the car there was conversation she was carrying on through shock, I am sure.

>Mr. SPECTER. Well, going back to the precise time that you heard the President say, "My God, I am hit," do you recollect whether she said anything at that time?

>Mr. KELLERMAN. No.

>Mr. SPECTER. Whether or not you can re-create what she said?

>Mr. KELLERMAN. Not that I can recall right then sir. This statement, or whatever she said, happened after all the shooting was over.

>Mr. SPECTER. All right. Now, you have described hearing a noise which sounded like a firecracker and you have described turning to your right and described hearing the President's voice and, again, what was your next motion, if any, or movement, if any?



>Mr. KELLERMAN. After I was sure that his statement was right that he was hit, turned from the back I come right down--

>Mr. SPECTER. You just indicated that you had turned to the left. Had you turned to the left after hearing his voice?

>Mr. KELLERMAN. Yes; certainly.

>Mr. SPECTER. And what did you see? You have described what you saw in terms of position of his hands.

>Mr. KELLERMAN. That was it.

>Mr. SPECTER. What did you do next?

>Mr. KELLERMAN. That is when I completely turned to my right and grabbed for the mike in the same motion, sideways telling the driver, "Let's get out of here; we are hit."

[...]

>Mr. SPECTER. When was it that Mrs. Kennedy made the statement which you have described, "My God, what are they doing?"

>Mr. KELLERMAN. This occurred after the flurry of shots.

[...]

>Mr. SPECTER. Mr. Kellerman, there is a report from the Federal Bureau of Investigation designated "Bureau File No. 105"--I believe there is an "S", although it is somewhat illegible on my copy--"S2555, report of Special Agent Robert P. Gemberling," dated December 10, 1963, which refers to an interview

of you by Special Agent Francis X. O'Neill, Jr., and James W. Sibert, in which the following is set forth: "He"--and this obviously refers to you--"advised that he heard a shot and immediately turned around looking past Governor Connally who was seated directly in back of him, to the President. He observed the President slumped forward and heard him say 'get me to a hospital.' Mr. Kellerman then heard Mrs. Kennedy say, 'Oh, no, as the President leaned toward her.'" That is the end of the quotation. My question is: Did you hear him; did you hear President Kennedy say, "Get me to a hospital"?

>Mr. KELLERMAN. No, sir.

>Mr. SPECTER. Did you hear Mrs. Kennedy say, "Oh, no"?

>Mr. KELLERMAN. No, sir.

>Mr. SPECTER. Do you have any knowledge or explanation as to why you would have been so quoted in the report of the FBI?

>Mr. KELLERMAN. When these two gentlemen talked to me, I don't know where they got those quotes, because the only two things that I told them, they were interested in what I heard from the people in the back seat, and one said "my God, I have been hit," which was President Kennedy, and Mrs. Kennedy said, "What are they doing to you?"

>Mr. SPECTER. You were interviewed, however, by Mr. O'Neill and Mr. Sibert on November 22, 1963?

>Mr. KELLERMAN. November what?

>Mr. SPECTER. November 22.

>Mr. KELLERMAN. No. November 22 is when they were in the morgue with me. They interviewed me in the office that--it was around the 27th. This was after the funeral.

>Mr. SPECTER. Did they have any conversation with you about these events in the morgue?

>Mr. KELLERMAN. Not that I recall, sir.

[...]

>Mr. SPECTER. Mr. Kellerman, I have read to you a part of what Special Agents O'Neill and Sibert have attributed to you in an interview which they have written about on November 22, 1963. Referring to that in the portion which I have read to you and which I will reread, I want you to direct your attention to the issue about which way you turned. The report states, "He advised he heard a shot and immediately turned around looking past Governor Connally who was seated directly in back of him to the President." Now, did that describe a turn to the right or to the left? This is a difficult question. Let me interject one thing. We are presupposing here, based on your testimony, that you did not discuss with Special Agents O'Neill or Sibert these specific events on November 22, to the best of your recollection as we sit here today.

>Mr. KELLERMAN. That is right.

>Mr. SPECTER. So that the question really goes to a situation where perhaps they have an inaccurate day or your recollection is inaccurate as to some of the things you might have told them. So, my prefatory question would be whether that is an accurate statement and is something you told them at some time.

>Mr. KELLERMAN. I don't believe I did. I think I will stand on my original statement.

>Representative FORD. The original statement you made here today?

>Mr. KELLERMAN. Yes, sir; very much.

>Mr. SPECTER. So that the statement I just read to you, so far as your best--

>Mr. KELLERMAN. I can't--

>Mr. SPECTER. So far as your best testimony is at this time, it was simply not made by you on November 22?

>Mr. KELLERMAN. That is right, sir.

>Mr. SPECTER. All right, now. Was that statement I just read to you, the short one about your turn, to the best of your recollection at this moment, did you ever make that statement to Special Agents O'Neill and/or Sibert?

>Mr. KELLERMAN. Mr. Specter, everybody I have talked to I have always turned to the right when I first heard the noise. I turned to my left to view the people in my back seat because it is a more comfortable position. So I don't think the turning is correct, sir.

>Mr. SPECTER. Would you say the report is incorrect?

>Mr. KELLERMAN. That is right.

>Representative FORD. May I ask--you have viewed these colored motion pictures which were taken during the assassination. Have you looked at those to see what your own actions were during this period of time?

>Mr. KELLERMAN. Yes, sir.

>Representative FORD. Do they coincide with what you have testified to here today?

>Mr. KELLERMAN. They certainly do.

([WC Vol. 2, p. 61]([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Kellerman.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Kellerman.pdf))  
[[text](<http://mcadams.posc.mu.edu/russ/testimony/kellerman.htm>)])

On 3/12/1964, the Warren Commission's assistant council Arlen Specter interviewed Sibert and O'Neill, asking them about their interactions with Kellerman. As Specter reported:

>I also questioned SA Sibert and SA O'Neill about their interviews of ASAIC Kellerman and SA Greer on the portions of the FBI report which Kellerman and Greer have repudiated.

>SAs Sibert and O'Neill stated that they interviewed SAs Kellerman and Greer formally on November 27, 1963, and talked to them only informally at the autopsy. SA O'Neill stated that he is certain that he had a verbatim note on Kellerman's statement that the President said "Get me to a hospital" and also that Mrs. Kennedy said "Oh, no." SA O'Neill stated that he was sure those were direct quotes from Kellerman because O'Neill used quotation marks in his report which indicated that he had written those precise words in his notes, which notes have since been destroyed after the report was dictated. SA O'Neill noted that Mr. Kellerman did not repeat that language in the interview of November 27, 1963, and that in the later interview O'Neill took down what Kellerman said without leading or directing him in any way.

([ARRB MD 154]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md154.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md154.pdf)))

In later interviews, O'Neill recalled Kellerman telling him that President Kennedy was the only one in the car with a Boston accent ([Interview by Harrison Livingstone, 5/20/1991] (<https://drive.google.com/file/d/1DKT7rfKvXcQhl33JeZf0IXsKfu7VG1hp/view>)); [4/2/1992 panel discussion at the Franklin Pierce Law Center](<http://www.manuscriptservice.com/FXO/transcript.pdf>); [ARRB deposition, 9/12/1997]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/ONeill\\_9-12-97.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/ONeill_9-12-97.pdf)) [[audio]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/audio/ARRB\\_Oneill.htm](https://history-matters.com/archive/jfk/arrb/medical_testimony/audio/ARRB_Oneill.htm))]; Interviews by William Law, [\*In the Eye of History, 2004] ([https://www.krusch.com/books/kennedy/In\\_The\\_Eye\\_Of\\_History.pdf](https://www.krusch.com/books/kennedy/In_The_Eye_Of_History.pdf)); [Interview by Brian R. Hollstein, 4/6/2005](<https://drive.google.com/open?id=19cjQnnZvQg7AFeTPpgc8qFjD1Rl3Prta>)).

No other witnesses claimed to hear the President vocalize words during the shooting. Texas Governor John Connally, seated in the right-center of the Limousine, told the Warren Commission that after he felt himself being shot, he said "\*Oh, no, no, no\*" and "\*My God, they are going to kill us all\*". When asked "\*Did President Kennedy make any statement during the time of the shooting or immediately prior thereto?\*", Connally replied "\*He never uttered a sound at all that I heard\*" ([WC Vol. 4, p. 129, 4/21/1964 testimony]([https://history-matters.com/archive/jfk/wc/wcvols/wh4/pdf/WH4\\_JohnConnally.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh4/pdf/WH4_JohnConnally.pdf)) [[text]([http://mcadams.posc.mu.edu/russ/testimony/conn\\_j.htm](http://mcadams.posc.mu.edu/russ/testimony/conn_j.htm))]). First Lady Jacqueline "Jackie" Kennedy, in the left-rear seat, said she heard Connally saying "\*Oh, no, no, no\*",

but no other words before the fatal head shot ([WC Vol. 5, p. 178, 6/5/1964 WC testimony] ([https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5\\_JackieKennedy.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5_JackieKennedy.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/kennedy.htm>)]). Mrs. Idanell "Nellie" Connally, in the left-center seat, said that President Kennedy **"made no utterance, no cry"**, and that she heard the Governor say **"Oh, no, no, no"** and **"My God, they are going to kill us all"** ([WC Vol. 4, p. 146, 4/21/1964 WC testimony]([https://history-matters.com/archive/jfk/wc/wcvols/wh4/pdf/WH4\\_NellieConnally.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh4/pdf/WH4_NellieConnally.pdf)) [[text]([http://mcadams.posc.mu.edu/russ/testimony/conn\\_n.htm](http://mcadams.posc.mu.edu/russ/testimony/conn_n.htm))). Secret Service Agent William Greer, the driver in the left front seat, was asked **"Did you hear anyone in the car say anything from the time of the first shot until the time of the third shot?"**, to which he replied **"Not to the best of my recollection, I don't remember"** ([WC Vol. 2, p. 112, 3/9/1964 WC testimony] ([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Greer.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Greer.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/greer.htm>)]).

### **\*\*Missing autopsy photographs showing the interior body/lungs\*\***

Medical photographer John Stringer took pictures of the body while it was being examined in the morgue at Bethesda Naval Hospital ([WC D 7, p. 280](<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>); [HSCA Vol. 7, p. 8] ([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M2\\_Autopsy.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M2_Autopsy.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]). Afterwards, all of the photographic film was reportedly handed over to Secret Service Agent Roy Kellerman ([ARRB 78]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md78.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md78.pdf)), [WC D 77] (<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=3&tab=page>) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>)]]; [WC D 7, p. 280] (<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>); [ARRB MD 122]([https://history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md122.pdf](https://history-matters.com/archive/jfk/arrb/master_med_set/pdf/md122.pdf))). The official collection of autopsy photographs are currently stored at the National Archives II building in College Park, Maryland.

Between 1966-1968, the Department of Justice made efforts to reevaluate the medical record of the assassination ([ARRB MD 59]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md59.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md59.pdf)) [[text](<http://www.jfklancer.com/ClarkPanel.html>)]]; [New York Times, 1/17/1969, **"Inquiry Upholds Warren Report"** by Fred P. Graham](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/A%20Disk/Autopsy%20JFK%20Clark%20Medical%20Panel%20Critique/Item%2005.pdf>); [HSCA Vol. 7, p. 1] ([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M1\\_Introduction.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M1_Introduction.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]). The autopsy pathologists Dr. James Humes, Dr. J. Thornton Boswell, Dr. Pierre Finck, and photographer John Stringer first took inventory of the photographs between 1966-1967 ([ARRB MD 12]

([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md12.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md12.pdf)); [ARRB MD 13] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md13.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md13.pdf)); [ARRB MD 14] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md14.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md14.pdf)); [ARRB MD 32] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md32.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md32.pdf))), and they had never viewed the photos before that point ([ARRB MD 19, p. 6, HSCA report on 8/10/1977 interview with Humes]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md19.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md19.pdf)); [ARRB MD 19, p. 9, HSCA report on 8/12/1977 interview with Stringer] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md19.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md19.pdf)); [HSCA Vol. 7, p. 243, HSCA 9/16/1977 interview with Humes and Boswell] ([https://www.history-matters.com/archive/jfk/hsca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59Ia\\_HumesBosw.pdf](https://www.history-matters.com/archive/jfk/hsca/reportvols/vol7/pdf/HSCA_Vol7_M59Ia_HumesBosw.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7f.htm>)] [[audio]([https://history-matters.com/archive/jfk/hsca/med\\_testimony/audio/HSCA\\_HumesBoswell.htm](https://history-matters.com/archive/jfk/hsca/med_testimony/audio/HSCA_HumesBoswell.htm))]; [ARRB MD 30, Finck's HSCA testimony, 3/11/1978] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md30.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md30.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/finckhsca.htm>)] [[audio] ([https://history-matters.com/archive/jfk/hsca/med\\_testimony/audio/HSCA\\_Finck\\_311.htm](https://history-matters.com/archive/jfk/hsca/med_testimony/audio/HSCA_Finck_311.htm))]; [ARRB MD 33, Finck's HSCA interview, 3/12/1978] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md33.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md33.pdf)) [[audio] ([https://history-matters.com/archive/jfk/hsca/med\\_testimony/audio/HSCA\\_Finck\\_312.htm](https://history-matters.com/archive/jfk/hsca/med_testimony/audio/HSCA_Finck_312.htm))]; [HSCA Vol. 1, p. 323, Humes HSCA testimony, 9/7/1978] ([https://www.history-matters.com/archive/jfk/hsca/reportvols/vol1/pdf/HSCA\\_Vol1\\_0907\\_7\\_Humes.pdf](https://www.history-matters.com/archive/jfk/hsca/reportvols/vol1/pdf/HSCA_Vol1_0907_7_Humes.pdf)) [[text]([http://mcadams.posc.mu.edu/russ/m\\_j\\_russ/hscahume.htm](http://mcadams.posc.mu.edu/russ/m_j_russ/hscahume.htm))]]).

On 11/10/1966, Humes, Boswell, and Stringer signed a report stating "*The X-rays and photographs described and listed above include all the X-rays and photographs taken by us during the autopsy, and we have no reason to believe that any other photographs or X-rays were made during the autopsy*" ([ARRB MD 13]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md13.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md13.pdf))). This was not a truthful statement. On numerous occasions, Humes, Boswell, and Stringer described taking pictures of the interior body and lungs. This is not shown in the official collection. When Humes testified to the Warren Commission on 3/16/1963, he recounted "...*Once again Kodachrome photographs were made of this area in the interior of the President's chest*", "...*The bruise here, photographs are far superior to my humble verbal description*..." ([WC Vol. 2, p. 347] ([https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>))]). Ramsey Clark talked about this discrepancy in a 1/21/1967 tape-recorded phone call with President Lyndon B. Johnson:

>**RC:** Ah, we had three pathologists that performed the autopsy on evening of November 22nd come in. We had to bring Finck from Viet Nam. There were only 8 of us, including the three pathologists.

>They went into archives last night. The staff worked till midnight on the autopsy photos and X-rays. They all three seemed to have a chip on their shoulder. I think they'll go along with our that they shouldn't talk.

>**LBJ:** They shouldn't what?

>**RC:** They shouldn't talk to anybody. But they are quite defensive of the criticism of them. They feel their professional reputations are at stake and what not. They say, "We haven't got it tied down as an affidavit yet." I hope they have it by Monday. They'll be working on it today or tomorrow here. They may have it done before then. But, they're so technical, so reticent about finding things that they're hard to work with.

>They say the autopsy photos conclusively confirm their judgment as to the bullet entered the back of the skull --- and it's not perfectly conclusive as to the one in the lower neck. It's very clear to them that they, there's nothing in the autopsy photos that contradicts anything that they said.

>Now, we've run into one problem last night that we didn't know of. That is, there may be a photo missing. Dr. Humes, Commander and Naval doctor, testified before the Warren Commission that this one photo made of the highest portion of the right lung. The other two doctors don't recall if such a photo was made. They do recall discussing the desired ability of making such a photo. But there is no such photo in these exhibits.

>It could be contended that that photo could show the course and direction the bullet that entered the lower part of the neck and exited the front part. We're seeing to run that down. The only other witness that would have any judgment at all would be the corpsman, naval corpsman, that took the photos. We have to talk to him. We're not too sure, until we see what the doctors conclude.

>That's desirable. We are left with one specific problem. Dr. Humes did testify before the Warren Commission there was such a photo [that] we don't have.

(LBJ Presidential Library, tape K67.01, program no.2 [[audio, 1:33](<https://discoverlbj.org/item/tel-11387>)] [[audio 2](<https://millercenter.org/the-presidency/secret-white-house-tapes/conversation-ramsey-clark-january-21-1967-0>)] [[transcript](<http://www.jfklancer.com/Clark.LBJ.html>)] [[transcript] ([http://www.kenrahn.com/Marsh/Scans/Clark\\_LBJ.html](http://www.kenrahn.com/Marsh/Scans/Clark_LBJ.html))])



On 1/26/1967, another phone call took place between Clark and Johnson. Clark said "...*I think we have the three pathologists and the photographer signed up now on the autopsy review and their conclusion is that the autopsy photos and x-rays conclusively support the autopsy report rendered by them to the Warren Commission. We were not able to tie down the question of the missing photo entirely, but we feel much better about it and we've got three of the four sign to an affidavit that says these are all the photos that they took and they do not believe anybody else took any others. There is this unfortunate reference in the Warren Commission report by Dr. Humes to a picture that just does not exist, as far as we know. I am checking further to see where the pictures were at all times. From every indication, that was there at the time. It puts Dr. Humes in kind of an awkward spot, though*" (LBJ Presidential Library, p.1, tape K67.01, program no.8 [[audio, 5:22] (<https://discoverlbj.org/item/tel-11411>)]]; [ARRB MD 68, Johnson's notes]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md68.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md68.pdf))).

Ramsey Clark chose to not pursue the truth, and he admitted so when he was interviewed for the [March 1977 issue of the Maryland State Medical Journal] (<https://archive.org/details/marylandstatemed2619medi/page/n243>). When Clark was asked "*What happened to your report?*", he replied "*It was released when Six Seconds in Dallas was published, partially to refute some of the junk that was in the book*". Even if Clark believed in a lone gunman, he still engaged in a cover-up.

The 1968 book *The Day Kennedy Was Shot* by Jim Bishop contains the following passage: "*Fresh bruises were found on the upper tip of the right pleural area near the bottom of the throat. There were also contusions in the lower neck. Humes called his doctors away from the table and asked the Navy photographer to shoot additional Kodachrome pictures. The lens picked up a bruise in the form of an inverted pyramid. It was a fraction short of two inches across the top, coming to a point at the bottom*...". The book's epilogue section cites the author's interviews with more than one autopsy witness - Secret Service Agent William Greer and the staff of Gawler's funeral home.

On 8/25/1972, John Stringer was interviewed by researcher David Lifton:

>Lifton: I see. Well let me ask you this: in Dr. Humes' testimony he does say that he did take certain pictures, you know, he specifies, like he took the lung out and took a picture of the lung. Now, do you remember taking a picture of the lung?

>Stringer: Right.

>Lifton: Was that with 4 x 5 cassettes?

>Stringer: Right.

[...]

>Lifton: I see, I see. So, in other words, you remember taking the pictures of the top of the lung, and you remember taking the pictures of the entry wound, inner and outer table, whatever the doctors call that. This is the thing where they actually peel back the -- well they try to make the picture of the bone -- the actual defect in the bone, you know, the actual injury to the bone itself -- not just the skull case or -- you know, the close-ups.

>Stringer: Yeah, we took close-ups, yeah.

([ARRB MD 84]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md84.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md84.pdf)))

On 8/12/1977, Stringer was interviewed by the House Select Committee on Assassinations. As reported:

>STRINGER said it was his recollection that all the photographs he had taken were not present in 1966  
[...]

[...]

>STRINGER said that his recollection that all the photographs he took were not present in the materials he viewed in 1966 was based on the receipt. However, STRINGER also said that he thought he had taken some interior photographs of the President's chest ("I believe so"). He said he didn't recall if these photographs were taken before or after the vital organs were removed. [...]

[...]

>Regarding any interior photographs, STRINGER said he believes he took at least one from the neck down and said he saw it in 1966.

It is not sure why Stringer claimed to remember seeing pictures of the interior body in 1966. Stringer did sign a document listing the inventory of photographs which do not show the interior body. Maybe he was misled in some way.

>STRINGER said he didn't take any photographs of the organs before or after they were removed because none were asked for. [...]

>Regarding the possibility that he took interior chest photographs, STRINGER said ". . . I believe some pictures were taken of the body cavity . . ." He indicated that he "exposed a film holder" of that area. [...]

>[...] STRINGER remembers taking "at least two exposures of the body cavity."

([ARRB MD 19, p. 9]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md19.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md19.pdf)) [[text](<http://www.kenrahn.com/Marsh/Autopsy/2070.TXT>)])

A HSCA report on a 8/17/1977 interview with Kennedy's personal physician Dr. George Burkley reads "*\*DR. BURKLEY said there were no photographs taken of the interior of the chest\**" ([ARRB MD 19, p. 4]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md19.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md19.pdf)) [[text](<http://www.kenrahn.com/Marsh/Autopsy/2070.TXT>)]). However, Burkley said he was not always present in the room during the body examination ([10/17/1967 interview, JFK Library] (<https://www.jfklibrary.org/sites/default/files/archives/JFKOH/Burkley%2C%20George%20G/JFKOH-GGB-01/JFKOH-GGB-01-TR.pdf>) [[text](<http://mcadams.posc.mu.edu/russ/testimony/burkley.htm>)] [[audio](<https://www.youtube.com/watch?v=2QOLYngundI>)]). Also, it is not known when Burkley first saw the images. It could have been any time between 12/9/1963-4/26/1965 ([HSCA Vol. 7, p. 23] ([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M3\\_CustodyChain.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M3_CustodyChain.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]).

According to a report on Dr. Humes' 8/10/1977 interview by the HSCA, "*\*DR. HUMES specifically recalls that Kodachrome photographs were taken of the President's chest, one of which showed a relatively significant part of the tract of the first missile\**" ([ARRB MD 19, p. 7]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md19.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md19.pdf)) [[text](<http://www.kenrahn.com/Marsh/Autopsy/2070.TXT>)]).

A report on Dr. Boswell's 8/16/1977 interview by the HSCA reads "...*\*He said the bullet passed through the upper thorax; he said he thought they photographed "...the exposed thoracic cavity and lung..." but doesn't remember ever seeing those photographs\*...*", "*\*Dr. BOSWELL couldn't recall if there was more than one interior chest photograph taken. He did say he didn't believe the track of the missile through the body could be seen. He said that if a photograph was taken of the apex of the lung and of the apex of the chest, this would have demonstrated the track better than not having such a photograph. Dr. BOSWELL did not state that such a photograph was not taken, saying instead that he "...thought a photograph was taken of the lung\**" ([ARRB MD 26]

([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md26.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md26.pdf)) [[text] (<http://www.kenrahn.com/Marsh/HSCA/BOSWELL.TXT>)].

On 9/16/1977, the HSCA interviewed Humes and Boswell together:

>Dr. BADEN. We're talking about also photographs Nos. 13 and 14. Did--in further discussing the exit perforation through the tracheotomy, did you have occasion to explore in the neck area beyond what is in the protocol, beyond what the description was? As to what was injured?

>Dr. HUMES. Well, the trachea, I think we described the irregular or jagged wound of the trachea, and then we described a contusion in the apex of the lung and the inferior surface of the dome of the right pleural cavity, and that's one photograph that we were distressed not to find when we first went through and catalogued these photographs, because I distinctly recall going to great lengths to try and get the interior upper portion of the right thorax illuminated--you know the technical difficulties with that, getting the camera positioned and so forth, and what happened to that film, I don't know. There were a couple films that apparently had been exposed to light or whatever and then developed, but we never saw that photograph.

>Dr. BADEN. From the time you first examined them, that particular photograph was never seen?

>Dr. HUMES. Never available to us, but we thought it coincided very neatly with the path that ultimately we felt that that missile took.

([HSCA Vol. 7, p. 243]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59Ia\\_HumesBosw.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M59Ia_HumesBosw.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7f.htm>)] [[audio]([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_HumesBoswell.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_HumesBoswell.htm))])

From Humes' 2/13/1996 deposition to the Assassination Records Review Board:

>Q. Other than that series of photographs, were the remainder of the photographs all taken at the beginning of the autopsy, do you recall?

>A. Virtually all of them were, yeah.

>Q. Do you remember--

>A. There's only basically two that weren't.

>One was the inside of the occipital region, which we interpreted as the wound of entrance, for obvious reasons, and one that never came--whatever happened to it, I was very disturbed by it. We took one of the interior of the right side of the thorax because there was a contusion of the right upper lobe of the lung. So the missile had passed across the dome of the parietal pleura and contused the right lobe. I wanted to have a picture of that, and I never saw it. It never--whether it was under-exposed or over-exposed or what happened to it, I don't know. And it's three years later when we were looking at it, of course. But we didn't see that photograph. So that was taken later, and the one of the inside of the skull was taken later. But all the rest of them were taken at the onset of examination.

([ARRB, 2/13/1996]([https://www.history-fmatters.com/archive/jfk/arrb/medical\\_testimony/pdf/Humes\\_2-13-96.pdf](https://www.history-fmatters.com/archive/jfk/arrb/medical_testimony/pdf/Humes_2-13-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/humesa.htm>)])

From Boswell's 2/26/1996 ARRB deposition:

>Q. We're about to look at some photographs that show just the brain. Putting those photographs aside, are there any other photographs that you remember having been taken during the time of the autopsy that you don't see here?

>A. The only one that I have a faint memory of was the anterior of the right thorax. I don't see it, and haven't when we tried to find it on previous occasions, because that was very important because it did show the extra-pleural blood clot and was very important to our positioning that wound.

>Q. There are additional descriptions of photographs showing--described as showing the entrance wound in the skull from both the exterior and the interior with the scalp reflected. Do you remember any photographs with the scalp reflected showing the wound of entrance in the skull?

>A. Well, I seem to remember a couple of photographs. That might be one, and particularly one showing the beveling of that same wound--or not beveling, but the tunneling. But I can't imagine that there are any photographs missing. Numerical- wise, are they all here?

>Q. Not that I'm aware of any photos that are missing since the 1966 inventory. The question would be whether there were other photographs taken that were not in the 1966--

>A. Yeah, well, we've always looked for the one of the chest cavity, and then I seem to remember photographs, color photographs of the tunneling.

>Q. Do you remember seeing the photographs themselves or do you remember taking the photographs?

>A. I've never seen the one of inside of the chest. The one of the skull wound, I thought I remembered seeing it, but I--now, I've seen an awful lot of pictures like in Livingstone's books. Where those came from, I don't know. And whether they're fabricated, some of them, or not--and I may be confusing pictures I've seen that are alleged to be autopsy photographs.

([ARRB, 2/26/1996]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Boswell\\_2-26-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Boswell_2-26-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/boswella.htm>)])

From John Stringer's 7/16/1996 ARRB deposition:

>Q: Did you take any photographs of the body before Y incision?

>A: Yes.

>Q: Did you take any photographs after there had been a Y incision?

>A: We took pictures of the insides, yes.

>Q. What kinds of pictures did you take of the insides?

>A: What they told us to take.

>Q: Do you have any recollection now as to what those shots would have been?

>A: Well, there was some in - an anterior shot up around the neck, and down around the adrenals.

>Q: Did you take any photographs of organs after they had been removed from the body?

>A: Not that I can recall, no.

[...]

>A: We went down to see them two years afterwards, and I remember some things inside the body that weren't there.

>Q: Is there anything else that you remember that wasn't there?

>A: I think it had to do with the adrenal system.

>Q: Any others that you remember?

>A: Not off -

>Q: Or, I guess, remember not being there?

>A: Not offhand.

[...]

>Q: Did you ever speak to Mr. Riebe about the apparent discrepancy in the number of films that had been exposed on the night of the autopsy?

>A: I don't know whether I did or not.

>Q: After the conversation with Captain Stover that you discussed earlier, did you ever raise the issue with him again?

>A: I don't know, but we raised the issue when we saw the photographs in `66.

>Q: What happened in 1966 when you raised the issue?

>A: Nothing.

>Q: To whom - When you say "we raised the issue", whom are you referring to?

>A: Well, when we were at the Archives - whoever was there.

>Q: Did you go with Dr. Humes?

>A: Dr. Humes and Dr. Boswell.

>Q: Were Drs. Humes and Boswell under the impression that there were some photographs missing?

>A: We talked about it, yes.

[...]

>Q: Now, the photographs that you've looked at so far are all of the photographs that we have at the Archives that are purported camera originals taken during the night of the autopsy. Could you now think back - and we have been over this to some extent before - of any images that you remember having taken that are not present here?

>A: In the body cavity

>Q: The body cavity. Do you remember any photographs, other than the ones that you're looking at, that should have depicted the entrance wound in the skull, either from inside the cranium, outside the cranium, with scalp reflected, or scalp not reflected?

>A: Are there some color prints of this?

>Q: Yes. You're pointing to numbers 44 and 45.

>A: Was this done when we went down to Archives? I signed it, but I never got a copy of it. I've never seen it before - only when I signed it, I guess.



>Q: At the time that you signed it, did you have an opportunity to read through the entire document?

>A: I guess, I did.

>Q: Do you remember whether you had an opportunity to question the accuracy of anything in the document?

>A: We talked there being missing photographs. I don't know whether this says anything about that in here, or not.

>Q: Could you look at the last sentence of the document, just before the signatures?

>A: That, to me, is wrong.

>Q: So, the statement that says that where it says that, "We have no reason to believe that any other photographs or X-rays were made during the autopsy" - is that the portion that you think is incorrect?

>A: Photographs.

>Q: Photographs. That there were other photographs taken?

>A: Yes.

>Q: Another one that you had mentioned previously in your deposition was a full-view of the body from above.

>A: Yes.

>Q: And you don't see that photograph -

>A: No, I haven't seen that at all.

>Q: Would it be fair to say, then, that in the first inventory that we have record of, that was signed by you, a document dated November 22nd - that that inventory was incorrect? There were more photographs than were recorded on that inventory?

>A: We went over what they had there, yes.

>Q: And then in the inventory that was made in 1966, that that was inaccurate, as well; is that correct?

>A: Yes. Well, that was from the '66 one?

>Q: Yeah.

>A: Yes. I think Dr. Humes, also, says there were some taken up by the top of the lung area, according to what I've been reading.

>Q: Can you explain to me any reason why Drs. Humes, Boswell, and yourself would have signed this statement in 1966, saying that it's a complete inventory, if you had reason to believe it was not a complete inventory?

>A: No.

>Q: Did anyone tell you to sign it?

>A: I don't know. I know we did talk about all of the pictures that were exposed were not there, because I brought up a thing about Captain Stover and his receipt of that.

([ARRB, 7/16/1996]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Stringer\\_7-16-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Stringer_7-16-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/stringer.htm>)] [[audio]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/audio/ARRB\\_Stringer.htm](https://history-matters.com/archive/jfk/arrb/medical_testimony/audio/ARRB_Stringer.htm))])

The photographic record was criticized by the Forensic Pathology Panel of the House Select Committee on Assassinations:

>Among the JFK assassination materials in the National Archives is a series of negatives and prints of photographs taken during autopsy. The deficiencies of these photographs as scientific documentation of a forensic autopsy have been described elsewhere (Wilbur, 1968). Here it is sufficient to note that:

>1. They are generally of rather poor photographic quality.

>2. Some, particularly closeups, were taken in such a manner that it is nearly impossible to anatomically orient the direction of view.

>3. In many, scalar references are entirely lacking, or when present, were positioned in such a manner to make it difficult or impossible to obtain accurate measurements of critical features (such as the wound in the upper back from anatomical landmarks.

>4. None of the photographs contain information identifying the victim; such as his name, the autopsy case number, the date and place of the examination.

>In the main, these shortcomings bespeak of haste, inexperience and unfamiliarity with the understandably rigorous standards generally expected in photographs to be used as scientific evidence. In fact, under ordinary circumstances, the defense could raise some reasonable and, perhaps, sustainable objections to an attempt to introduce such poorly made and documented photographs as evidence in a murder trial. Furthermore, even the prosecution might have second thoughts about using certain of these photographs since they are more confusing than informative. Unfortunately, however, they are the only photographic record of the autopsy.

([HSCA Vol. 7, \*Medical Panel Report\*, p. 45, 3/29/1979, Section IV. \*Authenticity\*, Part I. \*Introduction\*]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M4\\_Authenticity.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M4_Authenticity.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7b.htm>)])

On 3/21/1996, the Assassination Records Review Board met with a medical photographer named Earl McDonald, who was a former student of John Stringer. When asked to judge the photographic record credited to Stringer, McDonald listed several complaints:

>-There are no autopsy tags visible in any photos;

>-There are no whole body photos in the collection;

>-There is no photograph of the brain (at autopsy) immediately following removal from the cranium;

>-There is no photograph of the inside of the skull (following removal of the brain) showing the condition of the inside of the cranium;

>-There is no photograph of the reassembled skull;

>-There is no photograph of the chest cavity;

>-There is no extreme close-up of the back wound;

>-There is no wide-angle view and/or medium-field view of the cranium viewed from the outside (to go with the extreme close-up in the collection).

>When asked by ARRB staff what grade he would assign if he were asked to grade the present collection of autopsy photos, he said he would grade them "quite low," because among other reasons, the collection was not comprehensive (that is, did not represent the range of views that should have been depicted from either a normal autopsy, or especially of an autopsy involving gunshot wounds)

([ARRB MD 228]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md228.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md228.pdf)))

A medical photographer and illustrator named [Jim Stamos said] (<http://the-puzzle-palace.com/chapter4.htm>) *"he was quite dismayed at the quality of the autopsy photographs, having taken many, many photographs using similiar techniques and equipment as is used in autopsy photography as a normal part of his varied job functions over the past 29 years. The objectives of his photography are the same as that from any autopsy...'to provide specific and concise visual information.' He stated that he, and autopsy photographers that he has known, would have been, '...ashamed to have produced results such as I have seen. However, if the basic intention was to obfuscate then they succeeded\*"*.

**\*\*Where is JFK's brain, and all of the other autopsy specimens?\***

During the autopsy at Bethesda Naval Hospital, the brain and numerous other parts of the body were removed for preservation ([WC D 77, p. 2](<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=4&tab=page>) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>)]). A number of days afterwards, the body specimens were examined in the hospital by the autopsy pathologists. The brain was also photographed at this time. The findings of this examination were summarized in the 12/6/1963 supplementary autopsy report ([WC Vol. 16, p. 987]([https://history-matters.com/archive/jfk/wc/wcvols/wh16/pdf/WH16\\_CE\\_391.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh16/pdf/WH16_CE_391.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>)]).

The Forensic Pathology Panel of the House Select Committee on Assassinations attempted to trace the chain of custody for all of the body specimens, but could not locate them or fully explain their disappearance ([HSCA Vol. 7, p. 23, 3/29/1979, *\*Medical Panel Report\**, Section III. *\*Chain of Custody of the Materials Acquired During the Autopsy\**]

([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M3\\_CustodyChain.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M3_CustodyChain.pdf))  
[[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]).

Kennedy's personal physician Dr. George Burkley, along with the head of the Secret Service Protective Research Division Agent Robert I. Bouck, told the HSCA that after the supplemental examination, they took the specimens and stored them in a locked file cabinet located in the Executive Office Building in Washington, D.C. ([ARRB MD 123 - *\*HSCA Memorandum # 002237 from Jim Kelley and Andy Purdy, dated September 6, 1977, to Ken Klein, Subj: Interview with Robert I. Bouck\**] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md123.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md123.pdf)); [HSCA 180-10104-10271, Burkley's 11/28/1978 affidavit to the HSCA] (<http://www.kenrahn.com/Marsh/Autopsy/BURKLEY.TXT>))

A 4/22/1965 letter from Senator Robert F. Kennedy requested that Dr. Burkley transfer the autopsy materials to the custody of Mrs. Evelyn Lincoln, former personal secretary of John F. Kennedy ([ARRB, 7/24/1996](<https://www.maryferrell.org/showDoc.html?docId=43607#relPageId=12&tab=page>)). Senator Kennedy personally instructed Mrs. Lincoln to not give the materials to anybody without his written approval. In the words of the HSCA Forensic Pathology Panel, "*\*This demonstrates Robert Kennedy's firm control over the disposition of the materials\**" ([HSCA Vol. 7, p. 23, *\*Medical Panel Report\**, Section III. *\*Chain of Custody of the Materials Acquired During the Autopsy\**, Part III. *\*Subsequent History of Materials\**]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M3\\_CustodyChain.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M3_CustodyChain.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]).

On 4/26/1965, Dr. Burkley and Agent Bouck met with Evelyn Lincoln in room "409" of the National Archives I Building in Washington, D.C. to deliver the specimens ([ARRB MD 122] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md122.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md122.pdf)); [ARRB MD 70] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md70.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md70.pdf)); [ARRB MD 120] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md120.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md120.pdf))). The items were catalogued in a list. Among them were containers of photographic film and prints from the autopsy and supplemental examination, x-rays, the detached handle of the first casket used to carry the body, as well as "*\*1 plastic box, 9 by 6 1/2 by 1 inches, paraffin blocks of tissue sections\**", "*\*1 plastic box containing paraffin blocks of tissue sections plus 35 slides\**", "*\*A third box containing 84 slides\**", "*\*1 stainless steel container, 7 by 8 inches in diameter, containing gross material\**", and "*\*3 wooden boxes, each 7 by 3 1/2 by 1 1/4 inches, containing 58 slides of blood smears taken at various times during President Kennedy's lifetime\**" ([ARRB MD 70] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md70.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md70.pdf))). Burkley told the HSCA that the brain was carried in the 7 x 8 inch stainless steel container ([HSCA 180-10104-10271, Burkley's 11/28/1978 affidavit](<http://www.kenrahn.com/Marsh/Autopsy/BURKLEY.TXT>)).

From the report on Evelyn Lincoln's 7/5/1978 interview by the HSCA:

>Mrs. Lincoln recalled a visit to her office in the National Archives by Dr. George Burkley and Mr. Robert-Bouck to bring some materials. She recalls the men bringing in a group of materials (possibly in one or more cardboard boxes) and laying them down on the floor in front of her desk. She recalls there being a long flat box with a number of manila envelopes on top of it with a number of different sizes of little boxes on top of the envelopes.

>Mrs. Lincoln recalled that she didn't have a lot of notice that the materials were coming, saying she received a call from Dr. Burkley saying he would be over with some materials. She believes he arrived with one or two men. She recalls lifting up the box with all the materials in it and carrying them into the back security room and laying them on top of one of the file cabinet safes. Shortly thereafter, probably within a day, Mrs. Lincoln and her assistants obtained a "flat trunk" from the Archives staff and put the materials into the trunk and put the trunk into the Security Room. She said she has a specific recollection of lifting all the materials up and placing them into the trunk at the same time.

>Mrs. Lincoln's assistants at the time were George Dalton and Joe Giordano. She also said that "Boots' Miller (first name George) worked for her for a while but she wasn't sure if he was working at that time. Mrs. Lincoln was shown the receipt that Dr. Burkley gave her for the items and said it seemed to be accurate in terms of the day, April 26, 1965, and in terms of the general amount and types of containers she received. However, while Dr. Burkley told her in advance or at the time of transfer that the materials were related to the autopsy of the President, she did not know exactly what the materials were, nor did she open any of the containers to see if the receipt Dr. Burkley gave her corresponded to the materials she received. Mrs. Lincoln said she was very close to Dr. Burkley and took his word that all the materials were present.

This is when the autopsy specimens were last accounted for. Things get a lot murkier from this point on.

Lincoln told the HSCA that "**\*approximately a month or less\***" after the specimens were delivered to her, she then handed over the footlocker and two keys to Angela Novello, personal secretary of Robert F. Kennedy.

>Mrs. Lincoln said she was telephoned by Bobby Kennedy approximately a month or less after this transfer and told that he was sending Angie Novello, his secretary, over to the Archives to move the

trunk which Dr. Burkley had brought. They apparently wanted the materials moved to another part of the Archives, presumably to some location where Robert Kennedy was storing other materials.

>Shortly thereafter, Angie Novello came to Mrs. Lincoln's office on the fourth floor of the Archives with Herman Kahn and one or more of his deputies to take the trunk. Mrs. Lincoln said she had Ms. Novello sign a receipt for the materials (which was Mrs. Lincoln's custom whenever Angie Novello came to the Archives to obtain materials, even when at the behest of Robert Kennedy). Mrs. Lincoln is certain that she prepared the release for Ms. Novello's signature and kept the release among her materials. She does not know what happened to the receipt but assumes it is with the other receipts that Angie Novello signed, possibly under the name "Bobby Kennedy."

The HSCA could not locate the receipt Lincoln said she addressed to Novello.

[...]

>I then questioned Mrs. Lincoln in more detail concerning the trunk containing the autopsy materials and the disposition of the trunk. Mrs. Lincoln said the trunk was about two and a half feet by one foot high and she had a vague recollection that it was grey. She said she received the trunk from Archives personnel and received two keys for it. During the time between receiving the autopsy materials and putting them in the trunk she kept the materials in the Security Room on a file cabinet. Mrs. Lincoln said she had no intention of looking inside the various containers because she was very upset about the assassination of the President and was upset at the prospect of having to handle the autopsy materials. She said, however, she was very careful with them and noted that they fit neatly into the trunk. It is her present recollection that Dr. Burkley brought the receipt listing in detail the items she received. She is certain she didn't write any such receipt or have one typed. She also didn't remember reading the receipt very closely. When shown the receipt she had a general sense that the number of boxes referred to corresponded, at least roughly, to the materials she received and viewed in front of her desk and later moved to the file cabinet and later to the trunk itself. She acknowledged that she signed a brief note written at the bottom of the receipt Dr. Burkley gave her acknowledging that she received the materials. She said she did not recall ever seeing the documents which accompanied the autopsy materials.

[...]

>Mrs. Lincoln noted that when she gave the materials to Ms. Novello she gave her both keys to the trunk. Until she gave the keys to Ms. Novello she had kept them locked in her desk and kept the trunk locked in the security room each night. She says to her knowledge the trunk was never opened during

the time it was in her office spaces. It was Mrs. Lincoln's sense that Angie Novello knew where Robert Kennedy kept things in the Archives and said it was most likely in an area under Mr. Kahn's supervision and control.

([ARRB MD 128, \*HSCA Interview Report (#009823) dated July 5, 1978, prepared by Andy Purdy, concerning results of Interview of Mrs. Evelyn Lincoln\*]  
([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md128.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md128.pdf)))

The story of the footlocker was told differently years earlier when Lincoln was interviewed for the New York Times: "*Mrs. Lincoln, who is now in a staff job at the House of Representatives, said that Admiral Burkley delivered a locked chest to her at the Archives and that a few days later Angie Nevelle, Robert Kennedy's secretary, arrived and took it away. Mrs. Lincoln said that she had not looked inside the chest or read Admiral Burkley's inventory\**" ([New York Times, 8/27/1972, \*Mystery Cloaks Fate Of Brain of Kennedy\* by Fred P. Graham]  
(<https://www.nytimes.com/1972/08/27/archives/mystery-cloaks-fate-of-brain-of-kennedy-mystery-surrounds-fate-of.html>)). Did Mrs. Lincoln obtain a footlocker to store the specimens herself, or were they already in a footlocker when they were delivered to her?

Between 1966-1968, when the Department of Justice was focusing some attention on reviewing the medical evidence ([New York Times, 1/17/1969, \*Inquiry Upholds Warren Report\* by Fred P. Graham]  
(<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/A%20Disk/Autopsy%20JFK%20Clark%20Medical%20Panel%20Critique/Item%2005.pdf>); [HSCA Vol. 7, p. 1]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M1\\_Introduction.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M1_Introduction.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]), Attorney General Ramsey Clark tried to contact Robert F. Kennedy in hopes of gaining access to the specimens, but Robert "*was not sympathetic to the Government's need to acquire the autopsy material\**". Then, Clark had heated negotiations with Kennedy family representative Burke Marshall, former Assistant Attorney General ([HSCA Vol. 7, p. 23]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M3\\_CustodyChain.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M3_CustodyChain.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]). Clark reportedly told the HSCA that he "*had only requested transfer of the autopsy photographs and X-rays and did not recall any discussions with Robert Kennedy about any other autopsy materials\**" (\*Outside contact report of Ramsey Clark, May 9, 1978, House Select Committee on Assassinations (JFK Document No. 008159)\*; [HSCA Vol. 7, p. 23]  
([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M3\\_CustodyChain.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M3_CustodyChain.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]). According to a 10/29/1966 letter from Burke Marshall to the General Services Administration's Lawson Knott, the Kennedy family finally agreed to give the U.S. Government the autopsy x-rays, photographic film, photographic prints, as well



as the late President's clothing ([ARRB MD 112]  
([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md112.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md112.pdf))).

The specimens were first realized to be missing on 10/31/1966, according to a report from the National Archives and Records Administration titled "*Inspection of Materials Relating to the Autopsy of President. John F. Kennedy*". According to the report, Burke Marshall and Evelyn Lincoln met with several other government representatives, including Angela Novello, in room "6-W-3" at the National Archives I Building in Washington, D.C. The footlocker was presented, and Novello "*produced a key*" to unlock it. The footlocker was found to be empty except for a few papers. These papers included "*a carbon copy of the letter from Robert F. Kennedy to Burkley on April 22, 1965*", "*the original letter from Burkley to Lincoln on April 26, 1965, which also listed on the itemized inventory list the materials present at that transfer*", and inexplicably "*three large manilla envelopes of material which appeared to be copies of military service records of the late President*" ([ARRB MD 111]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md111.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md111.pdf))). In 1972, forensic pathologist Dr. Cyril Wecht was granted permission to search the autopsy materials at the National Archives. Wecht quickly alerted the media that the body specimens were nowhere to be found ([New York Times, 8/27/1972](<https://www.nytimes.com/1972/08/27/archives/mystery-cloaks-fate-of-brain-of-kennedy-mystery-surrounds-fate-of.html>)).

Evelyn Lincoln told the HSCA that she could not remember the 10/31/1966 meeting, nor could she remember seeing the footlocker after handing it to Angela Novello "*approximately a month or less*" after acquiring the specimens from Burkley on 4/26/1965 ([ARRB MD 128]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md128.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md128.pdf))). Angela Novello claimed in her 8/29/1977 HSCA interview and her 10/30/1978 affidavit that she could not remember ever being associated with any autopsy materials, nor could she remember handling any footlocker, nor the keys to such a footlocker ([HSCA Vol. 7, p. 23]  
([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M3\\_CustodyChain.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M3_CustodyChain.pdf))  
[[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]).

Although the specimens of the body are missing, the x-rays, photographic film and photographic prints associated with the autopsy still survive in the storage of the National Archives. The HSCA Forensic Pathology Panel could not offer any documentation explaining how this transaction occurred ([HSCA Vol. 7, p. 23]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M3\\_CustodyChain.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M3_CustodyChain.pdf))  
[[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]). Unless more documents resurface, there may never be a full explanation. The Panel ultimately drew attention the statements of Burke Marshall, suggesting that Senator Robert F. Kennedy could have intentionally hidden or destroyed the body specimens: "*While Burke Marshall also maintained that he had no actual knowledge of the disposition of the materials, he said it was his speculative opinion that Robert Kennedy obtained and disposed of these materials himself, without informing anyone else.*(74)

*Marshall said Robert Kennedy was concerned that these materials would be placed on public display in future years in an institution such as the Smithsonian and wished to dispose of them to eliminate such a possibility.(75) Marshall emphasized that he does not believe anyone other than Robert Kennedy would have known what happened to the materials and is certain that obtaining or locating these materials is no longer possible. (76)\*" (\*Outside contact report, Burke Marshall, May 18, 1978, JFK Document No. 008514\*; [HSCA Vol. 7, p. 23]  
([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M3\\_CustodyChain.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M3_CustodyChain.pdf))  
[[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)])*

### **\*\*Chest tubes\*\***

During the resuscitative efforts at Parkland Memorial Hospital, two surgical incisions were made on Kennedy's chest. These incisions are represented on the autopsy's [face sheet diagram] (<https://i.imgur.com/fxzGGOP.png>) by two vertical marks above the nipples, both notated "2 cm" ([ARRB MD 1]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md1.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md1.pdf))).

<https://drive.google.com/open?id=1qCJTX2Q8r1BZGK-YpPJJkfmHiVj0iGTi> (NSFW) - The incisions may be partially visible on the official autopsy photographs

The autopsy protocol summarized the emergency procedures done at Parkland: "*Dr. Perry noted the massive wound of the head and a second much smaller wound of the low anterior neck in approximately the midline. A tracheostomy was performed by extending the latter wound. At this point bloody air was noted bubbling from the wound and an injury to the right lateral wall of the trachea was observed. Incisions were made in the upper anterior chest wall bilaterally to combat possible subcutaneous emphysema\**", "*Situated on the anterior chest wall in the nipple line are bilateral 2 cm. long recent transverse surgical incisions into the subcutaneous tissue. The one on the left is situated 11 cm. cephalad to the nipple and the one on the right 8 cm. cephalad to the nipple. There is no hemorrhage or ecchymosis associated with these wounds\**" ([WC D 77] (<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=4&tab=page>) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>)]). "No hemorrhage" means no blood was found to have leaked into the body cavity, and "[Subcutaneous emphysema] ([https://en.wikipedia.org/wiki/Subcutaneous\\_emphysema](https://en.wikipedia.org/wiki/Subcutaneous_emphysema))" refers to air trapped beneath the surface of the skin. Subcutaneous emphysema is sometimes treated by making shallow incisions near the affected area – called "blowhole incisions" ([Anestezjol Intens Ter. 2011 Apr-Jun, 43(2):93-7, \*The skin incisions (blow holes) for treatment of massive subcutaneous emphysema\*] (<https://www.ncbi.nlm.nih.gov/pubmed/22011870>); [Interact Cardiovasc Thorac Surg. 2014 Dec,19(6):904-7, \*Modified blowhole skin incision using negative pressure wound therapy in the treatment of ventilator-related severe subcutaneous emphysema\*] (<https://academic.oup.com/icvts/article/19/6/904/682633>)).

Lead autopsy pathologist Dr. James Humes and his assistant Dr. J. Thornton Boswell appeared to believe the Parkland staff made these two incisions for the purpose of inserting [chest tubes] ([https://en.wikipedia.org/wiki/Chest\\_tube](https://en.wikipedia.org/wiki/Chest_tube)) until the effort was abandoned. This is different than saying they were blowhole incisions, as suggested by the protocol.

From Dr. Humes' 3/16/1964 Warren Commission testimony:

>[...] The report states, and Doctor Perry told me in telephone conversation that there was bubbling of air and blood in the vicinity of this wound when he made the tracheotomy. This caused him to believe that perhaps there had been a violation of one of the one or other of the pleural cavities by a missile. He, therefore, asked one of his associates, and the record is to me somewhat confused as to which of his associates, he asked one of his associates to put in a chest tube. This is a maneuver which is, was quite logical under the circumstances, and which would, if a tube that were placed through all layers of the wall of the chest, and the chest cavity had been violated one could remove air that had gotten in there and greatly assist respiration.

>So when we examined the President in addition to the large wound which we found in conversation with Doctor Perry was the tracheotomy wound, there were two smaller wounds on the upper anterior chest.

>Mr. DULLES - These are apparently exit wounds?

>Commander HUMES - Sir, these were knife wounds, these were incised wounds on either side of the chest, and I will give them in somewhat greater detail.

>These wounds were bilateral, they were situated on the anterior chest wall in the nipple line, and each were 2 cm. long in the transverse axis. The one on the right was situated 11 cm. above the nipple the one on the left was situated 11 cm. on the nipple, and the one on the right was 8 cm. above the nipple. Their intention was to incise through the President's chest to place tubes into his chest.

>We examined those wounds very carefully, and found that they, however, did not enter the chest cavity. They only went through the skin. I presume that as they were performing that procedure it was obvious that the President had died, and they didn't pursue this.

[...]

>[...] Now, we also made note of the types of wounds which I mentioned to you before in this testimony on the chest which were going to be used by the doctors there to place chest tubes. They also made other wounds. one on the left arm, and a wound on the ankle of the President with the idea of administering intravenous blood and other fluids in hope of replacing the blood which the President had lost from his extensive wounds. [...]

([WC Vol. 2, p. 347]([https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>)])

When interviewed for the Journal of the American Medical Association, Dr. Humes said "...*We also noticed that the Dallas doctors had tried to place chest tubes in the front of the President's chest, but the tubes had not gone in and we found no increase of blood or fluid in the pleural cavity\**" ([JAMA, 5/27/1992, *JFK's death - the plain truth from the MDs who did the autopsy\**]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md22.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md22.pdf)) [[text](<http://the-puzzle-palace.com/jama.htm>)]).

From Humes' 2/13/1996 deposition to the Assassination Records Review Board:

>Q. Did you notice any surgical incisions anywhere on the body of President Kennedy when you first saw him?

>A. Yeah, there was a gaping defect that was obviously a tracheotomy incision in the anterior neck, and there were a couple of small--you never heard much about this, either. A couple of small incised wounds on the chest, and I forget--I wrote down, wherever I wrote it down, that it looked like somebody was going to think of putting in a chest tube. But they never did, because all they did was go through the skin. They obviously--I imagine they decided the President was deceased before they were going to pursue it. But somebody started, apparently, to insert chest tubes, which would not be an unreasonable thing to do. They were, you know, maybe two centimeters long, something like that, and between the ribs, low in the anterior chest.

([ARRB, 2/13/1996]([https://www.history-fmatters.com/archive/jfk/arrb/medical\\_testimony/pdf/Humes\\_2-13-96.pdf](https://www.history-fmatters.com/archive/jfk/arrb/medical_testimony/pdf/Humes_2-13-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/humesa.htm>)])

From Dr. Boswell's 2/26/1996 ARRB deposition:

>Q. Do you have any impression as to whether the prosecutor should have been informed during the course of the autopsy or before, what the treating physicians in Dallas had learned during the time of the treatment of President Kennedy?

>A. Well, it would have been nice, and we discussed that, actually, because when we first started doing the autopsy, there were marks on the body that we had difficulty--they had started to do cutdowns, and they made little incisions around the nipples, and there was no tubes or anything there. And we didn't know whether they were actually trying to get into vessels or going to get into the chest, whether he had had a hemothorax or something. [...]

([ARRB, 2/26/1996]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Boswell\\_2-26-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Boswell_2-26-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/boswella.htm>)])

When the pathologists opened the chest, they reportedly observed bruising on top of the right lung and pleural cavity. They attributed this damage to the nearby passage of a bullet. According to them, the pleural cavity was not violated, only bruised. As Humes told the Warren Commission, "...\**we then opened his chest cavity, and we very carefully examined the lining of his chest cavity and both of his lungs. We found that there was, in fact, no defect in the pleural lining of the President's chest. It was completely intact*\*" ([WC Vol. 2, p. 347, 3/16/1964 testimony]

([https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>)]).

By most definitions, a chest tube procedure involves pushing the tube into the pleural cavity. The tube may then be used to drain excess blood, air, or to inflate a collapsed lung. Chest tubes were almost certainly used on Kennedy in some way, whether or not they went into the pleural space. No less than FOURTEEN medical professionals from Parkland Hospital made statements indicating that tubes were inserted into the chest:

Dr. Kemp Clark ([WC Vol. 17, p. 2, 11/22/1963 hospital report] (<https://www.maryferrell.org/showDoc.html?docId=1134#relPageId=28&tab=page>) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app8.htm>)], [ARRB MD 41, 11/22/1963 press conference] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md41.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md41.pdf)) [[text] (<http://mcadams.posc.mu.edu/press.htm>)]; [WC Vol. 21, p. 151, 11/23/1963 hospital report] (<https://www.maryferrell.org/showDoc.html?docId=1138#relPageId=175&tab=page>) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app8.htm>)]; [WC Vol. 6, p. 18, 3/21/1964 WC testimony]

([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Clark.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Clark.pdf)) [[text]  
([http://mcadams.posc.mu.edu/russ/testimony/clark\\_w.htm](http://mcadams.posc.mu.edu/russ/testimony/clark_w.htm))]]

Dr. Charles Carrico ([WC Vol. 17, p. 4, 11/22/1963 hospital report]  
(<https://www.maryferrell.org/showDoc.html?docId=1134#relPageId=30&tab=page>) [[text]  
(<http://mcadams.posc.mu.edu/russ/jfkinfo/app8.htm>)]; [WC Vol. 6, p. 1, 3/25/1964 WC testimony]  
([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Carrico.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Carrico.pdf)) [[text]  
(<http://mcadams.posc.mu.edu/russ/testimony/carrico2.htm>)]; [WC Vol. 3, p. 357, 3/30/1964 WC  
testimony]([https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3\\_Carrico.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3_Carrico.pdf)) [[text]  
(<http://jfkassassination.net/russ/testimony/carrico1.htm>)]; [HSCA Vol. 7, p. 266, 1/11/1978 HSCA  
interview]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/  
HSCA\\_Vol7\\_M59Ib\\_Carrico.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M59Ib_Carrico.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7f.htm>)]  
[[audio]([https://www.maryferrell.org/audio/HSCA/HSCA\\_Carrico.mp3](https://www.maryferrell.org/audio/HSCA/HSCA_Carrico.mp3))]; Interview for Sixth Floor  
Museum, 9/2/1997 [[Video]([https://www.c-span.org/video/?179175-1/kennedy-assassination-40th-  
anniversary](https://www.c-span.org/video/?179175-1/kennedy-assassination-40th-anniversary))] [[link 2](<https://www.youtube.com/watch?v=G7ngt-SqGv0>)]]

Dr. Malcolm Perry ([WC Vol. 17, p. 6, 11/22/1963 hospital report]  
(<https://www.maryferrell.org/showDoc.html?docId=1134#relPageId=32&tab=page>) [[text]  
(<http://mcadams.posc.mu.edu/russ/jfkinfo/app8.htm>)]; [11/23/1963 interview by Bob Welch for  
WBAP-TV/ NBC](<https://www.youtube.com/watch?v=sLbDuO-Lot0>); [New York Herald Tribune,  
11/24/1963, \*A Death in Emergency Room One\* by Jimmy Breslin]  
(<https://www.thedailybeast.com/jimmy-breslin-on-jfks-assassination-two-classic-columns>); [WC Vol.  
6, p. 7, 3/25/1964 WC testimony]([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/  
WH6\\_Perry.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Perry.pdf)) [[text]([http://mcadams.posc.mu.edu/russ/testimony/perry\\_m2.htm](http://mcadams.posc.mu.edu/russ/testimony/perry_m2.htm))]; [WC Vol. 3, p.  
366, 3/30/1964 WC testimony]([https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/  
WH3\\_Perry.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3_Perry.pdf)) [[text]([http://mcadams.posc.mu.edu/russ/testimony/perry\\_m1.htm](http://mcadams.posc.mu.edu/russ/testimony/perry_m1.htm))]; [12/1/1971  
interview by Harold Weisberg]([http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index  
%20Files/W%20Disk/Weisberg%20Harold/Personal%20Appearances/Tour%2011-16](http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/W%20Disk/Weisberg%20Harold/Personal%20Appearances/Tour%2011-16)), Weisberg,  
\*Post Mortem\*, 1975 edition, p. 378; [HSCA Vol. 7, p. 292, 1/11/1978 HSCA interview]  
([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59If\\_Perry.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M59If_Perry.pdf)) [[text]  
(<http://mcadams.posc.mu.edu/russ./jfkinfo/hscv7f.htm>)] [[audio]  
([https://www.maryferrell.org/audio/HSCA/HSCA\\_Perry.mp3](https://www.maryferrell.org/audio/HSCA/HSCA_Perry.mp3))]; [ARRB group interview, 8/27/1998]  
([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Parkland\\_8-27-98.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Parkland_8-27-98.pdf)) [[text]  
(<http://mcadams.posc.mu.edu/russ/testimony/arrbpark.htm>)]]

Dr. Charles Baxter ([WC Vol. 17, p. 8, 11/22/1963 hospital report]  
(<https://www.maryferrell.org/showDoc.html?docId=1134#relPageId=34&tab=page>) [[text]  
(<http://mcadams.posc.mu.edu/russ/jfkinfo/app8.htm>)]; [WC Vol. 6, p. 39, 3/24/1964 WC testimony]

([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Baxter.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Baxter.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/baxter.htm>)]; 10/10/1991 interview by Harrison Livingstone, mentioned in Livingstone's book \*High Treason 2\*; [ARRB group interview, 8/27/1998] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Parkland\\_8-27-98.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Parkland_8-27-98.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/arrbpark.htm>)]; [Interview by Larry King, 12/23/2003] (<http://transcripts.cnn.com/TRANSCRIPTS/0312/23/lkl.00.html>))

Dr. Robert McClelland ([WC Vol. 17, p. 11, 11/22/1963 hospital report] (<https://www.maryferrell.org/showDoc.html?docId=1134#relPageId=37&tab=page>) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app8.htm>)]; [WC Vol. 6, p. 30, 3/21/1964 WC testimony] ([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_McClelland.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_McClelland.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/mcclella.htm>))]

Dr. Marion Jenkins ([WC Vol. 17, p. 14, 11/22/1963 hospital report] (<https://www.maryferrell.org/showDoc.html?docId=1134#relPageId=40&tab=page>) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app8.htm>)]; [WC Vol. 6, p. 45, 3/25/1964 WC testimony] ([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Jenkins.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Jenkins.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/jenkins.htm>)]; [3/4/1981 Boston Globe interview] (<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/L%20Disk/Livingstone%20Harrison%20Edward/Item%20010.pdf>); [11/1993 presentation](<https://www.youtube.com/watch?v=DX58vrL5ZiA>))

Dr. Ronald Jones ([WC Vol. 6, p. 51, Jones' 3/24/1964 WC testimony] ([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Jones.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Jones.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/jones\\_r.htm](http://mcadams.posc.mu.edu/russ/testimony/jones_r.htm))]; 4/5/1991 interview with Harrison Livingstone, \*High Treason 2\*; [ARRB group interview, 8/27/1998] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Parkland\\_8-27-98.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Parkland_8-27-98.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/arrbpark.htm>)]; [10/13/1998 letter to Vince Palamara, \*JFK: From Parkland to Bethesda: The Ultimate Kennedy Assassination Compendium\*] ([https://books.google.com/books?id=cNwUCwAAQBAJ&ppis=c&lpg=PT38&ots=WpGiktIc3Y&dq=%22Palamara----%E2%80%9D\\_I\\_recently\\_testified\\_0on%20August\\_27%2C\\_1998%22&pg=PT38#v=onepage&q&f=false](https://books.google.com/books?id=cNwUCwAAQBAJ&ppis=c&lpg=PT38&ots=WpGiktIc3Y&dq=%22Palamara----%E2%80%9D_I_recently_testified_0on%20August_27%2C_1998%22&pg=PT38#v=onepage&q&f=false)); [BUMC Proceedings, Vol. 12, No. 2, 1999]([http://www.baylorhealth.edu/Documents/BUMC%20Proceedings/1999%20Vol%2012/No.%202/12\\_%2020\\_Jones.pdf](http://www.baylorhealth.edu/Documents/BUMC%20Proceedings/1999%20Vol%2012/No.%202/12_%2020_Jones.pdf)); [Interview by William Clifford Roberts, 8/1/2001] (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1276335/>); [Interview by Larry King, 12/23/2003] (<http://transcripts.cnn.com/TRANSCRIPTS/0312/23/lkl.00.html>))

Dr. Paul Peters ([WC Vol. 6, p. 68, 3/24/1964 WC testimony]  
([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Peters.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Peters.pdf)) [[text]  
(<http://mcadams.posc.mu.edu/russ/testimony/peters.htm>)]]; [11/2/1996 interview by Russel McLean and  
Brian Edwards, JFK/Deep Politics Quarterly Vol. 2 No. 2]([http://jfk.hood.edu/Collection/Weisberg  
%20Subject%20Index%20Files/P%20Disk/Peters%20Paul%20Conrad%20Dr/Item%2004.pdf](http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/P%20Disk/Peters%20Paul%20Conrad%20Dr/Item%2004.pdf));  
[Greenville Herald Banner, 11/22/1997]([http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index  
%20Files/P%20Disk/Peters%20Paul%20Conrad%20Dr/Item%2005.pdf](http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/P%20Disk/Peters%20Paul%20Conrad%20Dr/Item%2005.pdf)); [ARRB group interview,  
8/27/1998]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Parkland\\_8-27-98.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Parkland_8-27-98.pdf))  
[[text](<http://mcadams.posc.mu.edu/russ/testimony/arrbpark.htm>)]]

Dr. Gene Akin ([WC Vol. 6, p. 63, 3/25/1964 WC testimony]  
([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Akin.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Akin.pdf)) [[text]  
(<http://mcadams.posc.mu.edu/russ/testimony/akin.htm>)]]

Dr. Adolph Giesecke, Jr. ([WC Vol. 6, p. 72]  
([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Giesecke.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Giesecke.pdf)) [[text]  
(<http://mcadams.posc.mu.edu/russ/testimony/giesecke.htm>)]]

Dr. Richard Dulany ([WC Vol. 6, p. 113]  
([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Dulany.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Dulany.pdf)) [[text]  
(<http://mcadams.posc.mu.edu/russ/testimony/dulany.htm>)]]

Nurse Patricia Hutton ([WC Vol. 21, p. 216, hospital report]  
(<https://www.maryferrell.org/showDoc.html?docId=1138#relPageId=240&tab=page>) [[text]  
(<http://mcadams.posc.mu.edu/russ/testimony/hutton.htm>)]]

Nurse Diana Bowron ([WC Vol. 21, p. 203, hospital report]  
(<https://www.maryferrell.org/showDoc.html?docId=1138#relPageId=227&tab=page>); [WC Vol. 6, p.  
134, 3/24/1964 WC testimony]([https://www.history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/  
WH6\\_Bowron.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Bowron.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/bowron.htm>)]]

Nurse Margaret Hinchliffe ([WC Vol. 21, p. 239, hospital report]  
(<https://www.maryferrell.org/showDoc.html?docId=1138#relPageId=263&tab=page>); [WC Vol. 6, p.  
139, 3/21/1964 WC testimony]([https://www.history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/  
WH6\\_Hencliff.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Hencliff.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/henclif.htm>)]]



The tubes were reportedly administered by Drs. Ronald Jones, Charles Baxter, and Paul Peters. Nurses Margaret Hinchliffe and Diana Bowron said they helped the doctors in the task. Nurse Patricia Hutton said that afterwards, she helped remove the tubes from the body.

Is there a discrepancy here? If so, does it point to a cover-up?

Consider the autopsy protocol's mention of subcutaneous emphysema. Occasionally, subcutaneous emphysema is treated by tunneling a tube just underneath the surface of the skin without going into the thorax ([*Tex Heart Inst J.* 1999, 26(2): 129–131, *\*The use of subcutaneous drains to manage subcutaneous emphysema\**](<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC325617/?page=1>); [*Anaesthesia.* 2001 Jun, 56(6):593-4, *\*Relief of tension subcutaneous emphysema with a small-bore subcutaneous drain\**](<https://onlinelibrary.wiley.com/doi/full/10.1111/j.1365-2044.2001.2094-15.x>)). However, when reading the descriptions from the Parkland staff, this does not appear to have been the tubes' intended purpose.

Dr. Kemp Clark said in a 11/22/1963 press conference alongside Dr. Malcolm Perry *"\*On my arrival, the resuscitative efforts, the tracheostomy, the administration of chest tubes to relieve any possible- to relieve any possibility of air being in the pleural space, the electrocardiogram had been hooked up, blood and fluids were being administered by Dr. Perry and Dr. Baxter\*"* ([ARRB MD 41] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md41.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md41.pdf)) [[text] (<http://mcadams.posc.mu.edu/press.htm>))]). This implies the chest tubes were inserted all the way into the pleural cavity, or were at least meant to. Dr. Clark's 11/22/1963 hospital report reads *"\*Because of the lacerated trachea, anterior chest tubes were placed in both pleural spaces. These were connected to sealed underwater drainage\*"* ([WC Vol. 17, p. 2](<https://www.maryferrell.org/showDoc.html?docId=1134#relPageId=28&tab=page>) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app8.htm>))]).

Journalist Jimmy Breslin wrote, in a 11/24/1964 article based on an interview with Dr. Perry, *"\*While Perry worked on the throat, he said quietly, "Will somebody put a right chest tube in, please." The tube was to be inserted so it could suction out the blood and air packed in the chest and prevent the lung from collapsing\*"* ([*New York Herald Tribune*, 11/24/1963, *\*A Death in Emergency Room One\** by Jimmy Breslin](<https://www.thedailybeast.com/jimmy-breslin-on-jfks-assassination-two-classic-columns>)). If the doctors suspected that Kennedy suffered a collapsed lung, the proper thing to do would have been to fully insert the tube into the pleural cavity.

Dr. Clark said in his 3/21/1964 Warren Commission testimony "...\*As I recall, Dr. Perry stated that there was a small wound in the President's throat, that he made the incision for the tracheotomy through this wound. He discovered that the trachea was deviated so he felt that the missile had entered the President's chest. He asked for chest tubes then to be placed in the pleural cavities\*..." ([WC Vol. 6, p. 18]([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Clark.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Clark.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/clark\\_w.htm](http://mcadams.posc.mu.edu/russ/testimony/clark_w.htm)))]).

Dr. Robert McClelland said in his 3/21/1964 WC testimony "\*As well as I am aware, the tubes were both placed in. What this involves is simply putting a trocar, a large hollow tube, and that is put into the small incision, into the anterior chest wall and slipping the tube into the chest between a group of ribs for purposes of relieving any collection of air or fluid which is present in the lungs. The reason this was done was because it was felt that there was probably quite possibly a mediastinal injury with perhaps suffusion of blood and air into one or both pleural cavities\*" ([WC Vol. 6, p. 30]([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_McClelland.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_McClelland.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/mcclella.htm>))]). This, too, suggests a deeper surgical defect than reported by the autopsy pathologists.

Dr. Ronald Jones said in his 3/24/1964 WC testimony "...\*as they made a deeper incision in the neck to isolate the trachea, they thought they saw some gush of air and the possibility of a pneumothorax on one side or the other was entertained, and since I was to the left of the President, I went ahead and put in the anterior chest tube in the second intercostal space\*". "Pneumothorax" means a collapsed lung, and "intercostal space" means the layer of muscle between ribs. When Jones was asked "\*Was that tube fully inserted, Doctor?\*", he responded "\*I felt that the tube was fully inserted, and this was immediately connected to underwater drainage\*". When asked "\*What do you mean by "connected to underwater drainage", Dr. Jones?\*", he replied "\*The tube is connected to a bottle whereby it aerates in the chest from a pneumothorax and as the patient breathes, the air is forced out under the water and produces somewhat of a suction so that the lung will reexpand and will not stay collapsed and this will give adequate aeration to the body, and we decided to go ahead and put in a chest tube on the opposite side; since I could not reach the opposite side due to the number of people that were working on the President. Dr. Baxter was over there helping Dr. Perry on that side, as well as Dr. Paul Peters, the assistant head of urology here, and the three of us then inserted the chest tube on the right side, primarily done by Dr. Baxter and Dr. Peters on the right side\*" ([WC Vol. 6, p. 51]([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Jones.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Jones.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/jones\\_r.htm](http://mcadams.posc.mu.edu/russ/testimony/jones_r.htm)))]).

During the 3/24/1964 WC testimony of Dr. Paul Peters, when asked "\*Did you put that chest tube all the way in on the right side?\*", Peters replied "\*That's our presumption—yes\*" ([WC Vol. 6, p. 68]

([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Peters.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Peters.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/peters.htm>)]].

Dr. Robert McClelland said in his 3/25/1964 WC testimony "*\*Dr. Perry elected to perform a tracheotomy, and instructed some of the other physicians in the room to insert chest tubes, thoracotomy tubes\**" ([WC Vol. 6, p. 1]

([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Carrico.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Carrico.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/carrico2.htm>)]]. "Thoracotomy" means a surgical procedure that goes into the pleural cavity.

Dr. Malcolm Perry said in his 3/25/1964 WC testimony "...*\*The wound in the trachea was then enlarged to admit a cuffed tracheotomy tube to support respiration. I noted that there was free air and blood in the superior right mediastinum. Although I saw no injury to the lung or to the pleural space, the presence of this free blood and air in this area could be indicative of a wound of the right hemithorax, and I asked that someone put a right chest tube in for seal drainage\**..." ([WC Vol. 6, p. 7]

([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Perry.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Perry.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/perry\\_m2.htm](http://mcadams.posc.mu.edu/russ/testimony/perry_m2.htm))]]. If the tubes were meant to drain blood and air originating from the INSIDE of the thorax, then just sticking them under the skin wouldn't have helped. When Perry testified to the WC again on 3/30/1964, he said "*\*I asked someone to put in a chest tube to allow sealed drainage of any blood or air which might be accumulated in the right hemothorax. This occurred while I was doing the tracheotomy. I did not know at the time when I inserted the tube but I was informed subsequently that Dr. Paul Peters, assistant professor of urology, and Dr. Charles Baxter, previously noted in this record, inserted the chest tube and attached it to underwater seal or drainage of the right pneumothorax\**". When asked "*\*What is pneumothorax\**", Perry replied "*\*Hemothorax would be blood in the free chest cavity and pneumothorax would be air in the free chest cavity underlying collapse of the lungs\**". When discussing his phone contact with Dr. Humes, Perry said "*\*The second conversation was in regard to the placement of the chest tubes for drainage of the chest cavity. And I related to him, as I have to you, the indications that prompted me to advise that this be done at that time\**". When asked "*\*Dr. Perry, was the chest tube inserted in the President's chest abandoned or was that operation or operative procedure completed\**", he replied "*\*The chest tube, to be placed there, was supposedly placed into the pleural cavity. However, I have knowledge that it was not\**". When asked "*\*And what was the reason for its not being placed into the plueral cavity\**", Perry replied "*\*I did not speak with certainty but at that point I think that we were at the end of the procedure and they just did not continue with it\**" ([WC Vol. 3, p. 366]

([https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3\\_Perry.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3_Perry.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/perry\\_m1.htm](http://mcadams.posc.mu.edu/russ/testimony/perry_m1.htm))]]. Why would Perry go along with the autopsy pathologists and contradict himself by saying that he "now" has knowledge the tubes *\*weren't\** inserted into the plueral cavity? He was there. Perry's colleagues sure seemed to indicate the tubes were

pushed that far. On 12/1/1971, Perry was [interviewed by researcher Harold Weisberg at the SWU School of Medicine](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/W%20Disk/Weisberg%20Harold/Personal%20Appearances/Tour%2011-16-12-7-71/Item%2007.pdf>). As Weisberg summarized, Perry said "...*the autopsy is wrong on attributing the chest incisions to subcutaneous emphysema. He used both hands and gestured to each breast. He asked that this be done and the reason was for a "closed chorostomy"*. As Weisberg noted, it was as if Perry were saying "*any child should know that*" (Weisberg, *Post Mortem*, 1975 edition, p. 378, *Epilogue*). The transcription "chorostomy" is not a known medical term, however the suffix "[ostomy](<https://medical-dictionary.thefreedictionary.com/ostomy>)" refers to "A surgical procedure creating an opening in the body for the discharge of body wastes". Perry may have said "thoracostomy". On 1/11/1978, Perry was interviewed by the House Select Committee on Assassinations. He explained "...*there was some bruising and also some bubbly looking blood over there on the right seriatal pleura, upper portion of the chest, why I thought perhaps there might also have been a hemo or pneumothorax accident. I asked Dr. Baxter to put in a right chest tube, which he did. And Dr. Jones put in a left one, I think, about the same time*". Again, chest tubes can only treat a hemothorax or pneumothorax if they are fully inserted into the pleural cavity. Perry then said "...*I didn't know whether there was or not. I surmised there might well be a hemothorax or pneumothorax because, not knowing the trajectory of the--of the missile, and when I saw the bruised apical pleura and there was some bubbly blood in that area, and I didn't know whether that blood had been frothed a little bit as a result of air coming out of the trachea in our attempts to breathe for him or whether it was coming out of a lung. And as a result, since a tension pneumothorax or serious chest injury could have obviously been a serious problem, why we elected to put in a chest tube. But the chest tube, I later learned, was not necessary because the chest cavity was not violated -- but I didn't know that at the time. It wasn't done diagnostically; it was done therapeutically*". When asked "*How did you determine that the pleural cavity was not violated?*", he replied "*Found that out later in the autopsy report*", "*It's interesting to me -- and I'm not being critical-but it's interesting to me that the pathology report does not reflect that. The autopsy report said that those incisions were made to combat subcutaneous emphysema, which is not a -- in the current jargon -- a viable therapeutic technique*" ([HSCA Vol. 7, p. 292] ([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59If\\_Perry.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M59If_Perry.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ../jfkinfo/hscv7f.htm>)] [[audio] ([https://www.maryferrell.org/audio/HSCA/HSCA\\_Perry.mp3](https://www.maryferrell.org/audio/HSCA/HSCA_Perry.mp3))).

When Dr. Charles Carrico was interviewed by the HSCA on 1/11/1978, he said "...*they performed a tracheostomy to assure an adequate airway and instructed some other physicians to insert chest tubes to try to rule out the possibility of any tension in the thorax which could impair his circulation also*". When asked "*What evidence did you obtain from the chest tubes?*", Carrico replied "*Again, this is second-hand, I didn't do this. But, when the chest tubes were inserted, there was a small amount of blood, and small amount of air, which could have resulted from the actual surgical manipulations or could conceivably have been commensurate or compatible with some very small basically pneumothorax or hemothorax. But the chest tubes did not show any signs of massive injury and did not*

in their insertion didn't improve the situation\*" ([HSCA Vol. 7, p. 266]  
([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59Ib\\_Carrico.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M59Ib_Carrico.pdf))  
[[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7f.htm>)] [[audio]  
([https://www.maryferrell.org/audio/HSCA/HSCA\\_Carrico.mp3](https://www.maryferrell.org/audio/HSCA/HSCA_Carrico.mp3))].

Researcher Harrison Livingstone interviewed Dr. Jones on 4/5/1991 and Dr. Baxter on 10/10/1991. Livingstone wrote in his book *\*High Treason 2\**: "*\*We went to see Dr. Ronald Coy Jones, the chairman of the Department of Surgery at Baylor University, in his office. He was very gracious while we set up our camera. Dr. Jones, who was senior resident in 1963, told me: "That's accurate [the picture]. The cuff was a good two inches wide."^5 He got a good look at it because he was standing alongside the body and made one of the incisions for the chest drainage tubes. Dr. Paul Peters made the other, with Dr. Charles Baxter assisting him. All three doctors insist today that Dr. Humes was wrong and that the incisions entered the chest after the pump was started. "I saw it sucking air," Dr. Baxter told me.^6\**" (Livingstone, *\*High Treason 2\**, 1992, Chapter 4. *\*Parkland Memorial Hospital\**).

In a 8/2/1997 interview for the Sixth Floor Museum, Dr. Carrico said "...*\*Because there was concerns about whether he had pneumothorax or not- we hadn't had time to get an x-ray- they actually put chest tubes in both chests. Those are things to- so if you do have a collapsed lung, it can expend it and you can breath\**" ([[Video](<https://www.c-span.org/video/?179175-1/kennedy-assassination-40th-anniversary>)] [[link 2](<https://www.youtube.com/watch?v=G7ngt-SqGv0>)]).

On 8/27/1998, Dr. Perry said in a group interview for the Assassination Records Review Board "...*\*I asked the chest tubes be put in because once you start pressure-assisted respiration, if he had a chest tube he might have a tension pneumothorax. And not knowing the extent of his head injury with any certainty, as Dr. Jones said, we didn't look at that. We were busy trying to get an airway. And so as it turned out, the chest tubes were not necessary. There was no injury to the chest cavity, but I didn't know that at the time. Not knowing how many shots there were and what was going on, as Dr. Baxter said, put the full-court press on; otherwise, we might lose him\**", "...*\*when you start pressure-assisted respiration, if there's an injury to the lung you're liable to induce the tension pneumothorax, which causes a catastrophic cardio pulmonary collapse, so that's the reason I asked for chest tubes to be put in. Dr. Jones inserted one on the left and I guess Paul on the right side. It turned out those were unnecessary, but that was my request at that time. And the reason they were put in was because I asked for them\**" ([ARRB, 8/27/1998]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Parkland\\_8-27-98.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Parkland_8-27-98.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/arrbpark.htm>)]).

Dr. Ronald Jones said, in a 1999 article featured in the *\*Baylor University Medical Center Proceedings\**, "*\*I inserted a left anterior chest tube in the second interspace in the midclavicular line.*

*Not knowing whether it was a right or left pneumothorax, Dr. Paul Peters, chairman of urology, and Dr. Charles Baxter, who up to this point was assisting Dr. Perry with the tracheostomy—with some assistance from me—inserted a right chest tube\**" ([BUMC Proceedings, Vol. 12, No. 2] (<http://www.baylorhealth.edu/Documents/BUMC%20Proceedings/1999%20Vol%2012/No.%2012/12%20%20Jones.pdf>)). Again, the "second interspace" is between the ribs.

The staff at Parkland suspected that Kennedy suffered a collapsed lung, which is treated by inserting a tube into the pleural cavity. And their statements indicate the tubes were indeed pushed that far.

The parietal pleura is just the last of many layers of tissue lining the thoracic wall. Sometimes, a chest tube is unintentionally pushed between the tissues of this wall without going into the pleural cavity ([Thomas AN: \*Penetrating thoracic trauma (Trauma Rounds)\*. West J Med 121:510-513, Dec 1974] (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1129668/pdf/westjmed00304-0082.pdf>); [Int J Crit Illn Inj Sci. 2014 Apr-Jun, 4(2): 143–155, \*Thoracostomy tubes: A comprehensive review of complications and related topics\*](<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4093965/>); [BACVTS Journal, Vol. 1, No. 1, Jan 2016, \*A comprehensive review of tube thoracostomy and management\*]([https://www.researchgate.net/publication/317905443\\_A\\_comprehensive\\_review\\_of\\_tube\\_thoracostomy\\_and\\_management](https://www.researchgate.net/publication/317905443_A_comprehensive_review_of_tube_thoracostomy_and_management))). But this is not the same as failing to puncture the pleura – it just takes considerable strength to push the tube in, and sometimes the layers of tissue misalign during the procedure. If the intention at Parkland was to puncture the pleura, this almost certainly would have been achieved by the different doctors working on both sides of Kennedy's body.

The autopsy pathologists should probably receive the blame for this discrepancy. They may have not told the full truth about the damage they observed inside of the body. Either that, or they somehow missed the defects in the pleura while examining the chest. Anybody who wants to try arguing that should remember the pathologists had more than a couple of hours to inspect the chest cavity. The simplest explanation is an open-ended one.

### **\*\*Shallow back wound\*\***

The autopsy pathologists officially concluded that Kennedy's torso wounds were created by one bullet entering the upper back and exiting the throat. But they did not settle on this theory during the body examination at Bethesda Naval Hospital, or at least not immediately. Early on, the pathologists expressed the opinion that the back wound was an entrance without an exit. The back wound was probed with the doctors' fingers and a surgical tool meant for the purpose (sometimes called a "Nélaton probe"). Reportedly, the probe only revealed a path in the tissues less than the length of a finger. If the throat wound was truly an exit for a bullet which entered the upper back and passed through the body,

then the probing failed to demonstrate this. This problem was briefly noted in the autopsy protocol as *"\*The missile path through the fascia and musculature cannot be easily probed\*"* ([WC D 7, p. 4] (<https://www.maryferrell.org/showDoc.html?docId=10479&relPageId=6>) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>)]). According to a report on a 3/11/1964 interview with lead autopsy pathologist Dr. James Humes and assistant Dr. J. Thornton Boswell *"\*Dr. Humes and Dr. Boswell stated that after the bullet passed between the two strands of muscle, those muscle strands would resist any probing effort and would not disclose the path of the bullet to probing fingers\*"* (Arlen Specter, *\*Interview of Autopsy Surgeons\** [[page 1] ([https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes\\_j\\_j\\_cdr/humes\\_j\\_j\\_cdr-0018.jpg](https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes_j_j_cdr/humes_j_j_cdr-0018.jpg))] [[page 2] ([https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes\\_j\\_j\\_cdr/humes\\_j\\_j\\_cdr-0019.jpg](https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes_j_j_cdr/humes_j_j_cdr-0019.jpg))]). Dr. Humes said in his 3/16/1964 Warren Commission testimony *"\*Attempts to probe in the vicinity of this wound were unsuccessful without fear of making a false passage\*"* ([WC Vol. 2, p. 347] ([https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>)]). Dr. Pierre Finck, the forensic pathologist assisting the autopsy, explained during his 2/24-25/1969 testimony at the trial of Clay Shaw *"...\*I did not succeed in probing from the entry in the back of the neck in any direction and I can explain this. This was due to the contraction of muscles preventing the passage of an instrument, and if I had forced the probe through the neck I may have created a false passage\*"*, *"\*I couldn't introduce this probe for any extended depth. I tried and I can give explanations why. At times you cannot probe a path, this is because of the contraction of muscles and different layers. It is not like a pipe, like a channel. It may be extremely difficult to probe a wound through muscle\*"* ([The State of Louisiana v. Clay Shaw, 2/24-25/1969](<http://www.aarlibrary.org/publib/jfk/garr/trial/pdf/Feb24.pdf>) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/finckshaw.htm>)]). The wounds in the torso were reportedly not dissected, going against the correct procedure in forensic autopsies ([Finck's Shaw trial testimony, 2/24-25/1969](<http://www.aarlibrary.org/publib/jfk/garr/trial/pdf/Feb24.pdf>) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/finckshaw.htm>)]]; [HSCA Vol. 7, p. 181]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M54\\_Critique.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M54_Critique.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7c.htm#crit>)]).

The "shallow back wound" problem was documented by the two FBI Agents who witnessed the autopsy, James Sibert and Francis X. O'Neill. Both agents recalled the doctors becoming puzzled when they couldn't find a bullet in the body to explain the back wound. Sibert and O'Neill then telephoned Agent Charles Killion of the FBI Laboratory in Stafford County, Virginia, who informed them of a bullet reportedly discovered on a gurney at Parkland Memorial Hospital. After the pathologists were told this news, they theorized that a bullet had lodged in the back and proceeded squeeze out of it's own entry wound and fall onto the gurney which Kennedy was laying on. The Warren Commission would later conclude that the gurney associated with the [recovered bullet CE 399] (<https://www.maryferrell.org/photos.html?set=NARA-CE399>) must have been used to carry the wounded Texas Governor John Connally, not President John F. Kennedy ([WC, p. 79] (<https://www.archives.gov/research/jfk/warren-commission-report/chapter-3.html#bullet>)).

The reports from Sibert and O'Neill did not account for a bullet passage at the tracheotomy site. Evidently, it took some time for the pathologists to realize this incision was a former bullet wound.

The earliest record of information disseminating from the morgue is a FBI teletype memo, timestamped 2:00 AM 11/23/1963, based on information relayed by Sibert and O'Neill:

>ONE BULLET HOLE LOCATED JUST BELOW SHOULDERS TO RIGHT OF SPINAL COLUMN AND HAND PROBING INDICATED TRAJECTORY AT ANGLE OF FORTY FIVE TO SIXTY DEGREES DOWNWARD AND HOLE OF SHORT DEPTH WITH NO POINT OF EXIT. NO BULLET LOCATED IN BODY.

>PATHOLOGIST OF OPINION BULLET WORKED WAY OUT OF BACK DURING CARDIAC MASSAGE PERFORMED AT DALLAS. IT IS NOTED THAT SECRET SERVICE AGENT RICHARD JOHNSON TURNED OVER TO BULAB ONE SIX POINT FIVE MILLIMETER RIFLE BULLET, PAREN APPROX TWENTY FIVE CAL PAREN, COPPER ALLOW, FULL JACKET, WHICH HE ADVISED WAS FOUND ON STRETCHER IN EMERGENCY ROOM AT DALLAS HOSPITAL. AT TIME IT WAS NOT KNOWN IF STRETCHER WAS THAT WHICH HAD BEEN USED FOR PRESIDENT.

([ARRB MD 149](<https://www.maryferrell.org/showDoc.html?docId=680>))

On 11/26/1963, Sibert and O'Neill submitted their full FBI report on the autopsy:

[...] Following the removal of the wrapping, it was ascertained that the President's clothing had been removed and it was also apparent that a tracheotomy had been performed, [...]

[...]

>During the latter stages of this autopsy, Dr. HUMES located an opening which appeared to be a bullet hole which was below the shoulders and two inches to the right of the middle line of the spinal column.

>This opening was probed by Dr. HUMES with the finger, at which time it was determined that the trajectory of the missile entering at this point had entered at a downward position of 45 to 60 degrees. Further probing determined that the distance traveled by this missile was a short distance inasmuch as the end of the opening could be felt with the finger.

>Inasmuch as no complete bullet of any size could be located in the brain area and likewise no bullet could be located in the back or any other area of the body as determined by total body X-Rays and inspection revealing there was no point of exit, the individuals performing the autopsy were at a loss to explain why they could find no bullets.

>A call was made by Bureau agents to the Firearms Section of the FBI Laboratory, at which time SA CHARLES L. KILLION advised that the Laboratory had received through Secret Service Agent RICHARD JOHNSON a bullet which had reportedly been found on a stretcher in the emergency room of Parkland Hospital, Dallas, Texas. This stretcher had also contained a stethoscope and pair of rubber gloves. Agent JOHNSON had advised the Laboratory that it had not been ascertained whether or not



this was the stretcher which had been used to transport the body of President KENNEDY. Agent KILLION further described this bullet as pertaining to a 6.5 millimeter rifle which would be approximately a 25 caliber rifle and that this bullet consisted of a copper alloy full jacket.

>Immediately following receipt of this information, this was made available to Dr. HUMES who advised that in his opinion this accounted for no bullet being located which had entered the back region and that since external cardiac massage had been performed at Parkland Hospital, it was entirely possible that through such movement the bullet had worked its way back out of the point of entry and had fallen on the stretcher.

[...]

>On the basis of the latter two developments, Dr. HUMES stated that the pattern was clear that the one bullet had entered the President's back and had worked its way out of the body during external cardiac massage and that a second high velocity bullet had entered the rear of the skull and had fragmented prior to exit through the top of the skull.

([WC D 7, p. 280](<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>))

On the same day, Sibert and O'Neill made another related memo:

>Following arrival at the Naval Medical Center and preparation of the President's body for inspection and autopsy, to be performed by Dr. Humes, chief pathologist and commander, U.S. Navy, Admiral Burkley, the President's personal physician advised that Mrs. Kennedy had granted permission for a limited autopsy and he questioned any feasibility for a complete autopsy to obtain the bullet which had entered the President's back.

>At this point, it will be noted Dr. Humes, as the physician conducting the autopsy, stated it was his opinion that the bullet was still in the President's body and could only be extracted through a complete autopsy, which he proposed to do.

>Special Agent Roy Kellerman, Secret Service, in conference with Special Agents Sibert and O'Neill, from an investigative and protective standpoint, advised Admiral Burkley that it was felt the bullet should be located.

>At this point, Adm. C.B. Galloway, Commanding Officer of the National Naval Medical Center, Bethesda, Md., told Commander Humes to perform a complete autopsy.

([ARRB MD 156]([https://history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md156.pdf](https://history-matters.com/archive/jfk/arrb/master_med_set/pdf/md156.pdf)) [[scan 2](<https://www.maryferrell.org/showDoc.html?docId=82#relPageId=20&tab=page>)])

On 3/12/1964, Sibert and O'Neill were interviewed by Arlen Specter, Assistant Counsel of the Warren Commission. Specter summarized this meeting in a report:

>SA O'Neill and SA Sibert advised that the autopsy surgeons made substantial efforts to determine if there was a missile in President Kennedy's body to explain what happened to the bullet which apparently entered the back of his body. They stated that the opinion was expressed by both Commander Humes and Lt. Col. Finck that the bullet might have been forced out of the back of the President's body upon application of external heart massage. They stated that this theory was advanced after SA Sibert called the FBI laboratory and talked to SA Killion who advised that a bullet had been found on a stretcher at Parkland Hospital. SA Sibert relayed that information to the doctors.

>SA O'Neill and Sibert advised that they did not recall any discussion of the theory that the bullet might have been forced out of the body by external cardiac massage until after SA Sibert reported the finding of the bullet on the stretcher; however, neither agent could conclusively rule out the possibility that such a hypothesis was advanced prior to that time, but each expressed the opinion that he thought that theory was expressed after information was obtained about the bullet on the stretcher. [...]

([ARRB MD 154]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md154.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md154.pdf))])

The same meeting was summarized in a FBI memo:

>[...] The following is an account of the interview in question and answer form. [...]

[...]

>Question: Did you call Agent Killian prior to or after the wound was discovered in the President's back?

>Answer: After this wound was discovered.

>Question: Did you observe probing done by medical examiners using the finger- in the back wound and by whom was the probing done?

>Answer: Yes, probing done by Commander Hume.

>Question: What was the reaction of the examiners upon being notified that a bullet had been found on a stretcher used at Dallas?

>Answer: Commander Humes stated that this accounted for no bullet being located which had entered the back region and that it was entirely possible that the bullet had worked its way back out the point of entry while cardiac massage was being performed at the Dallas hospital.

([ARRB MD 153]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md153.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md153.pdf))])

Sibert and O'Neill reaffirmed their reports in a 6/29/1966 memo:

>RAUPACH also questioned as to whether or not the measurements as set forth in FD 302s submitted by SAs SIBERT and O'NEILL had actually been measurements furnished by the Pathologist or had been represented conclusions reached by the Agents. He was informed that all figures set forth in such FD 302 had been obtained from the Pathologist performing the autopsy.

[...]

>Mr. THOMPSON also asked if the Pathologist conducting the autopsy had made any mention of a bullet passing out of the neck at the point that the tracheotomy had been preformed at Parkland Hospital, at Dallas, Texas. He was advised that no such statement was made and that in fact the Pathologist was quite concerned concerning injury in the back and could not find a point of exit for this bullet neither could he find the projectile. Mr. THOMPSON was further advised that at that time Agent SIBERT had telephonically contacted SA CHARLES L. KILLIAN in the Firearms Section at the Bureau at which time it had been ascertained that a bullet had been found on a stretcher in the Parkland Hospital and this information was relayed to the Pathologist conducting the autopsy who stated that in all probability this accounted for no bullet being found in the body in the back region and that such had probably been worked out by cardiac massage which had been performed when the President was on a stretcher at Parkland Hospital.

[...]

>[...] ASAC McDERMOTT also asked whether the information contained in the FD 302s submitted by SAs SIBERT and O'NEILL concerning the autopsy were the conclusions of the Agents and all was actual information obtained from the Pathologist who are in attendance at the autopsy. Mr. McDERMOTT was advised that the agents submitted no conclusions of their own and that all information furnished in the FD 302 was obtained from the Pathologists who were in attendance at the autopsy.

([ARRB MD 157]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md157.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md157.pdf)))

Sibert created another memo on 10/13/1966:

>Furthermore, information set forth in the FD 302 of agents SIBERT and FRANCIS X. O'NEILL, JR. relating to autopsy findings as stated by Dr. HUME were based on the conclusions reached by Dr. HUME concerning locations of points of entry of bullets and Dr. HUME was not aware that a bullet had emerged through the neck at the point where the tracheotomy incision had been made at Parkland Hospital, Dallas, Texas.

([ARRB MD 158]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md158.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md158.pdf)))

The FBI, early in their investigations, promoted the theory that the back wound had no exit, attributing the throat wound to a fragment from the head shot ([PatSpeer.com, *\*A New Perspective on the Kennedy Assassination\** by Pat Speer, Chapter 1b: *\*Establishing the "Facts"\**](<http://www.patspeer.com/chapter1b%3Aclearingthingsup>)). It wasn't until 12/24/1963 that the Bureau

acquired a copy of the official autopsy protocol ([FBI 62-109090-29, WC HQ File, Section 1] (<https://www.maryferrell.org/showDoc.html?docId=61488&relPageId=74&>); [FBI 62-109060-4236, JFK HQ File, Section 102](<https://www.maryferrell.org/showDoc.html?docId=62389#relPageId=151&tab=page>)). Before receiving the protocol, the FBI only had the information from Sibert and O'Neill, the clothing worn by Kennedy at the time of the shooting, and the reports from the staff at Parkland Hospital. A memo from Assistant Director in charge of the FBI Lab Ivan Conrad to the Lab's Special Agent Roy H. Jevons stated that the tears on the front of Kennedy's shirt resembled an exit for a bullet fragment ([FBI 62-109060-1086, JFK HQ File, Section 14] (<https://www.maryferrell.org/showDoc.html?docId=62264#relPageId=85&tab=page>)), even though the original lab report only said the tears resembled an exit for a "projectile" ([WC D 205, p. 154] (<https://www.maryferrell.org/showDoc.html?docId=10672#relPageId=157&tab=page>)). Eventually, it became understood that the photographic evidence from Dealey Plaza, like the [Zapruder film] (<https://www.youtube.com/watch?v=iU83R7rpXQY>) and the [Altgens 6 photo] (<http://content.invisioncic.com/r16296/post-5199-074941900%201294964243.jpg>), showed Kennedy reaching for his neck moments BEFORE the fatal head shot. Officially, Kennedy's head was struck by only one bullet, so his body language ruled out the possibility of throat wound coming from the head shot.

The autopsy's laboratory technician, James Jenkins, said that when the pathologists tried to probe the back wound after removing the organs, he could see an impression poking up underneath the pleural cavity. If true, it would be even more difficult to believe the real bullet track went ABOVE the cavity and out the throat. On 9/23/1979, Jenkins told researcher David Lifton, as transcribed in Lifton's 1980 book *\*Best Evidence: Disguise and Deception in the Assassination of John F. Kennedy\**:

[Part VI. *\*1979: The Coffin/Body Problem\**, Chapter 27. *\*The Recollections of James Curtis Jenkins et al.\**, *\*Interviewing Jenkins\**]

[...]

>He remembered very clearly Humes' probing the back wound with his little finger. "What sticks out in my mind," Jenkins told me, "is the fact that Commander Humes put his little finger in it, and, you know, said that . . . he could probe the bottom of it with his finger, which would mean to me [it was] very shallow." He had another recollection. After the body was opened and the organs removed, Jenkins watched the doctors probe it again. "I . . . I remember looking inside the chest cavity and I could see the probe . . . through the pleura [the lining of the chest cavity]. . . ."

>LIFTON: Explain that to me. You could see the probe that he was putting in the wound? You could see it through the pleura?

>JENKINS: You could actually see where it was making an indentation.

>LIFTON: . . . an indentation on the pleura.

>JENKINS: Right . . . where it was pushing the skin up. . . . There was no entry into the chest cavity . . . it would have been no way that that could have exited in the front because it was then low in the chest cavity . . . somewhere around the junction of the descending aorta [the main artery carrying blood from the heart] or the bronchus in the lungs. . . .

>LIFTON: Did you hear Humes say he could feel the bottom of it with his finger?

>JENKINS: Yes, I did.

Jenkins said in a panel discussion on 4/6/1991 "*...\*I remember seeing Dr. Humes probe that wound with his finger, and again to- I relate back to this- these things probably because the impressions, and I thought, well, you know, his hands are extremely large to be doing something like that. They were trying to force an entry into the pleural cavity, and there was none. And you could actually see behind the pleural ridges as they probed into that area. And those ridges were- were going down. And as Paul says, they were probably down about the area of the middle lobe of the lung. There was never an entrance established into the pleural cavity. It was probed both with his finger and with the metal probe, and I remember that distinctly because I remember the impression of those that I saw from inside the body, because the organs had been removed at that point in time\**", "*\*Well, what I saw was- and they were probing the wound from the back of the body, the body was raised, there were no organs in- in the pleural cavity at all in the body at that point in time, we had taken them all out. I saw Dr. Humes' finger, the impression of his finger going down the inside behind the pleura without penetrating in, to the point that his finger would go-\**..." ([[Video](<https://www.youtube.com/watch?v=QpmMa10KNHo>)]). Later, Jenkins told researcher William Law "*\*Humes probed it, to begin with, with his little finger. Humes has huge hands. Humes is a big man. And then they used a probe. I could see his finger and I could see the probes behind the pleural area in the back and it never did break into the pleural cavity. And the wound actually went down and stopped\**" ([Law, *\*In the Eye of History\**, 2004]([https://www.krusch.com/books/kennedy/In\\_The\\_Eye\\_Of\\_History.pdf](https://www.krusch.com/books/kennedy/In_The_Eye_Of_History.pdf))). Jenkins and Law then collaborated on the 2018 book *\*At The Cold Shoulder of History\**. Chapter 4 reads "*...\*At this time, the internal organs had all been removed and the body cavity was empty. I could see that Dr. Humes and Dr. Finck had started to probe the back wound. Dr. Humes first probed the wound with a metal probe but later used a round tipped sound (probe) and his little finger because he was afraid of creating a false passage from the back wound into the chest cavity. The impression that his finger made was clearly visible under the pleural lining of the chest cavity. There was no entrance found into the chest cavity from the back wound\**", and chapter 13 reads "*\*As previously stated the back wound was probed by Dr. Humes and Dr. Finck and its trajectory was in a downward direction of approximately 45 to 60° which could be readily observed from inside the pleural cavity after the removal of the body organs\**".

Autopsy witness Paul O'Connor seemed to recall speculation about an undercharged round piercing Kennedy's back. When interviewed by William Law, O'Connor said "*...\*And another thing, we found out, while the autopsy was proceeding, that he was shot from a high building, which meant the bullet had to be traveling in a downward trajectory and we also realized that this bullet—that hit him in the back—is what we called in the military a "short shot," which means that the powder in the bullet was defective so it didn't have the power to push the projectile—the bullet—clear through the body. If it had been a full shot at the angle he was shot, it would have come out through his heart and through his sternum*", "*...As I said before, this shows a short shot, which didn't get a clean burn or have enough*

*punch to send the bullet completely into the body\**" ([Law, *\*In the Eye of History*, 2004] ([https://www.krusch.com/books/kennedy/In The Eye Of History.pdf](https://www.krusch.com/books/kennedy/In_The_Eye_Of_History.pdf))).

Sibert and O'Neill would say that, prior to their call to Agent Killion informing them of the bullet's discovery at Parkland, there was some speculation that a high-tech ammunition could have disintegrated after entering the back. When O'Neill was interviewed on 1/10/1978 by the House Select Committee on Assassinations, he reportedly said "...*\*some discussion did occur concerning the disintegration of the bullet. A "general feeling" existed that a soft-nosed bullet struck JFK. In reference to the back wound, there was discussion that the bullet could have been a "plastic" type or an "Ice" bullet (dissolves after contact). There was also no real sense either way that the wounds were caused by the same kind of bullet\**" ([ARRB MD 86]

([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md86.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md86.pdf)) [[text] (<http://www.kenrahn.com/Marsh/Jfk-conspiracy/O%27NEILL.TXT>)]). The report on Sibert's 8/25/1977 HSCA interview reads "*\*Sibert said the doctors were discussing the amount of fragmentation of the bullet and the fact that they couldn't find a large piece. They were wondering if it was a kind of bullet which "fragmentizes" completely. That is why Sibert left the room to call the lab, to find out about that type of bullet\**", "*\*Sibert remembered that in his call to Killion he had asked about some discussion the doctors were having about a possible deflection of the bullet through the body caused by striking bone. He said he thought this might have accounted for the extensive fragmentation\**" ([ARRB MD 86]

([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md86.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md86.pdf)) [[text] (<http://www.kenrahn.com/Marsh/Jfk-conspiracy/SIBERT.TXT>)]). Sibert stated in his 10/24/1978 affidavit to the HSCA "...*\*The doctors also discussed a possible deflection of the bullet in the body caused by striking bone. Consideration was also given to a type of bullet which fragments completely. In connection with a possible deflection of the bullet entering the back, some discussion ensued regarding X-Rays of the lower body and the femur areas\**", "*\*Following discussion among the doctors relating to the back injury, I left the autopsy room to call the FBI Laboratory and spoke with Agent Chuch Killion. I asked if he could furnish any information regarding a type of bullet that would almost completely fragmentize\**" ([ARRB MD 46]

([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md46.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md46.pdf)) [[text] (<http://www.kenrahn.com/Marsh/Jfk-conspiracy/SIBERT.TXT>)]). O'Neill's 11/8/1978 affidavit to the HSCA reads "*\*When the autopsy doctor appeared to have no idea of where the bullet entering the back may have gone, the doctors began discussing other possible outlets for the bullet\**", "*\*Some discussion did occur concerning the disintegration of the bullet. A general feeling existed that a soft-nosed bullet struck JFK. There was discussion concerning the back wound that the bullet could have been a "plastic" type or an "ice" bullet, one which dissolves after contact. There was also no real sense either way that the wounds were caused by the same kind of bullet\**" ([ARRB MD 47]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md47.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md47.pdf)) [[text] (<http://www.kenrahn.com/Marsh/Jfk-conspiracy/O%27NEILL.TXT>)]). When O'Neill was [interviewed by researcher Harrison Livingstone on 5/20/1991]

(<https://drive.google.com/file/d/1DKT7rfKvXcQh133JeZf0IXsKfu7VG1hp/view>), he said "...\*Jim Sibert went out and asked- called up the Laboratory to find out if, you know, if there's such a thing as an ice bullet, or a bullet that could disintegrate\*". When O'Neill appeared on a [4/2/1992 panel discussion at the Franklin Pierce Law Center in Concord, New Hampshire] (<http://www.manuscriptservice.com/FXO/transcript.pdf>), he said "...\*all of a sudden we're starting to say, "Is it a magic bullet? Is it an ice bullet? Is there some type of a particular bullet which could occur—go in and melt? What happened to it?" Don't know! Jim Sibert leaves at that time and says, "I'll go out and make a telephone call to our laboratory and find out what the situation was\*". When Sibert gave his [deposition to the Assassination Records Review Board on 9/11/1997]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Sibert\\_9-11-97.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Sibert_9-11-97.pdf)), he said "...\*So, that's when I called and thought maybe there was some type of bullet that would disintegrate. There just was no bullet that could be located\*", "\*When I talked with Killion that night, "Chuck," I said, "is there any kind of a bullet that would completely fragmentize? Maybe hit a bone and go down in the lower extremity of the body?\*"". O'Neill said during his [9/12/1997 ARRB Deposition] ([https://web.archive.org/web/20151228224836/http://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Oneill\\_9-12-97.pdf](https://web.archive.org/web/20151228224836/http://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Oneill_9-12-97.pdf)) "...\*We thought it might have been an ice bullet. We thought it might have been a wax bullet, a plastic bullet\*..." ([[audio] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/audio/ARRB\\_Oneill.htm](https://history-matters.com/archive/jfk/arrb/medical_testimony/audio/ARRB_Oneill.htm)))]. Sibert told researcher William Law "...\*So, I said, "Well, let me go and call over at the lab, see if there is any kind of an ice bullet that might have fragmentized completely\*" ([Law, \*In the Eye of History\*, 2004] ([https://www.krusch.com/books/kennedy/In\\_The\\_Eye\\_Of\\_History.pdf](https://www.krusch.com/books/kennedy/In_The_Eye_Of_History.pdf))). When [O'Neill was interviewed on 4/6/2005 by Brian R. Hollstein from the \*Society of Former Special Agents of the Federal Bureau of Investigation\* (SFSAFBI)](<https://drive.google.com/open?id=19cjQnnZvQg7AFeTPpgc8qFjD1Rl3Prta>), he said "...\*One of us decided that Jim would be the one to call the Bureau and he called the Bureau, the laboratory, and he said, "Look, we are here, we have a body and a bullet hole, but there's no bullet. Could it be an ice bullet like Dick Tracy?\*"". When [Sibert talked to the SFSAFBI's Jack O'Flatherty on 6/30/2005](<https://drive.google.com/file/d/1R4nFt8DZ-ISAwdqNWMrHI3tB95Y-6q0J/view?usp=sharing>), he said "...\*They were thinking more x-rays. I said, "Well, let me go and call over at the Bureau Headquarters and I'll find out if there's any kind of a bullet that can fragmentize that they wouldn't pick up... or the x-rays wouldn't see." I think they'd already x-rayed part of the back\*" ([[audio](<https://www.youtube.com/watch?v=AI8bbITdvsW>))].

Throughout their lives, both Sibert and O'Neill continued to believe the bullet which entered Kennedy's back did not exit. O'Neill also insisted, paradoxically, that a lone gunman was responsible for the assassination. O'Neill tended to think the throat wound reported at Parkland Hospital was caused fragment from the fatal head shot. This explanation does not make sense with only two bullets entering the body, given the photographic evidence of Kennedy reacting to his throat wound moments before the fatal head shot. O'Neill acted as if he did not understand this problem ([Hartford Courant, 1/18/1979, \*Kennedy Assassination Conclusions Absurd\*](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/O%20Disk/ONeill%20Francis%20X%20Jr/Item%2002.pdf>); [Interview by

Harrison Livingstone, 5/20/1991] (<https://drive.google.com/file/d/1DKT7rfKvXcQh33JeZf0IXsKfu7VG1hp/view>); [4/2/1992 panel discussion at the Franklin Pierce Law Center](<http://www.manuscriptservice.com/FXO/transcript.pdf>); [ARRB deposition, 9/12/1997]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/ONeill\\_9-12-97.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/ONeill_9-12-97.pdf)) [[audio]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/audio/ARRB\\_Oneill.htm](https://history-matters.com/archive/jfk/arrb/medical_testimony/audio/ARRB_Oneill.htm))]; Interviews by William Law, [\*In the Eye of History, 2004] ([https://www.krusch.com/books/kennedy/In\\_The\\_Eye\\_Of\\_History.pdf](https://www.krusch.com/books/kennedy/In_The_Eye_Of_History.pdf)); [Interview by Brian R. Hollstein, 4/6/2005](<https://drive.google.com/open?id=19cjQnnZvQg7AFeTPpgc8qFjD1Rl3Prta>); \*A Fox Among Wolves\*, 2008). Sibert, on the other hand, tended to be more open to alternative explanations, but did not say for sure whether he believed in a conspiracy ([ARRB deposition, 9/11/1997]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Sibert\\_9-11-97.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Sibert_9-11-97.pdf)); Interviews by William Law, [\*In the Eye of History\*, 2004] ([https://www.krusch.com/books/kennedy/In\\_The\\_Eye\\_Of\\_History.pdf](https://www.krusch.com/books/kennedy/In_The_Eye_Of_History.pdf)); [Interview by Jack O'Flatherty, 6/30/2005](<https://drive.google.com/file/d/1R4nFt8DZ-ISAwdqNWMrHI3tB95Y-6q0J/view?usp=sharing>) [[audio](<https://www.youtube.com/watch?v=AI8bbITdvsW>)]; [Interview by Edward F. Clendenin, 2007](<http://libx.bsu.edu/cdm/ref/collection/376OrHis/id/64>) [[audio] ([https://www.youtube.com/watch?v=WSiLVt\\_CR8s&t=74m15s](https://www.youtube.com/watch?v=WSiLVt_CR8s&t=74m15s))].

### **\*\*The pathologists talk to the Warren Commission\*\***

When did the autopsy pathologists suspect or conclude a bullet passage at the site of the tracheotomy, DURING or AFTER the body examination? Answering this question will be the main focus from this point forward.

On 3/11/1964, the Warren Commission's assistant council Arlen Specter interviewed lead pathologist Dr. James Humes, assistant Dr. J. Thornton Boswell, and Admiral Calvin Galloway, commanding officer of the Bethesda medical center. Specter's report on this meeting reads:

>All three described the bullet wound on President Kennedy's back as being a point of entrance. Admiral Holloway then illustrated the angle of the shot by placing one finger on my back and the second finger on the front part of my chest which indicated that the bullet traveled in a consistent downward path, on the assumption that it emerged in the opening on the President's throat which had been enlarged by the performance of the tracheotomy in Dallas.

>Commander Humes explained that they had spent considerable time at the autopsy trying to determine what happened to the bullet because they found no missile in the President's body. According to Commander Humes, the autopsy surgeons hypothesized that the bullet might have been forced out the back of the President on the application of external heart massage after they were advised that a bullet had been found on a stretcher at Parkland Hospital.



>Dr. Humes and Dr. Boswell were shown the Parkland report which describes the wound of the trachea as being "ragged", which they said was characteristic of an exit rather than an entrance wound. Dr. Humes and Dr. Boswell further said that it was their current opinions that the bullet passed in between two major muscle strands in the President's back and continued on a downward flight and exited through his throat. They noted, at the time of the autopsy, some bruising of the internal parts of the President's body in the area but tended to attribute that to the tracheotomy at that time. Dr. Humes and Dr. Boswell stated that after the bullet passed between the two strands of muscle, those muscle strands would resist any probing effort and would not disclose the path of the bullet to probing fingers, as the effort was made to probe at the time of the autopsy.

(Specter, \*Interview of Autopsy Surgeons\* [[page 1]

([https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes\\_j\\_j\\_cdr/humes\\_j\\_j\\_cdr-0018.jpg](https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes_j_j_cdr/humes_j_j_cdr-0018.jpg))] [[page 2]

([https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes\\_j\\_j\\_cdr/humes\\_j\\_j\\_cdr-0019.jpg](https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes_j_j_cdr/humes_j_j_cdr-0019.jpg))]

Specter's report did not specify when the pathologists changed their conclusions.

On 3/16/1964, Dr. Humes gave his testimony to the Warren Commission. He stated that, at some point, he telephoned Parkland Hospital's Dr. Malcolm Perry, who explained to him what the throat wound looked like before any incisions were made.

>Commander HUMES - Now, as the President's body was viewed from anteriorly in the autopsy room, and saying nothing for the moment about the missile, there was a recent surgical defect in the low anterior neck, which measured some 7 or 8 cm. in length or let's say a recent wound was present in this area.

>This wound was through the skin, through the subcutaneous tissues and into--

>Mr. SPECTER - To digress chronologically--

>Commander HUMES – Yes.

>Mr. SPECTER - Did you have occasion to discuss that wound on the front side of the President with Dr. Malcolm Perry of Parkland Hospital in Dallas?

>Commander HUMES - Yes, sir; I did. I had the impression from seeing the wound that it represented a surgical tracheotomy wound, a wound frequently made by surgeons when people are in respiratory distress to give them a free airway.

>To ascertain that point, I called on the telephone Dr. Malcolm Perry and discussed with him the

situation of the President's neck when he first examined the President, and asked him had he in fact done a tracheotomy which was somewhat redundant because I was somewhat certain he had.

>He said, yes; he had done a tracheotomy and that as the point to perform his tracheotomy he used a wound which he had interpreted as a missile wound in the low neck, as the point through which to make the tracheotomy incision.

>Mr. SPECTER - When did you have that conversation with him, Dr. Humes?

>Commander HUMES - I had that conversation early on Saturday morning, sir.

>Mr. SPECTER - On Saturday morning, November 23rd?

>Commander HUMES - That is correct, sir.

Humes did not specify whether this phone call took place during or after the body examination. He only said it occurred "Saturday morning, November 23rd". The call was also described as occurring on 11/23/1963 in Humes' handwritten notes ([WC Vol. 17, p. 29] (<https://www.maryferrell.org/showDoc.html?docId=1134#relPageId=55&tab=page>)) and the autopsy protocol ([WC D 77, p. 2] (<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=4&tab=page>)). This is not very precise – "morning" could mean any time between 12:00 – 11:59 AM. The examination may have continued past midnight, and the body stayed in the morgue until around 3:30-4:00 AM when it was placed into a new casket and transported to the White House ([ARRB MD 236, p. 5] (<https://www.maryferrell.org/showDoc.html?docId=758#relPageId=5&tab=page>); [WC D 4, p. 80] (<https://www.maryferrell.org/showDoc.html?docId=10404#relPageId=155&tab=page>); [WC Vol. 18, p. 745] (<https://www.maryferrell.org/showDoc.html?docId=1135#relPageId=759&tab=page>); [ARRB MD 163] ([https://history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md163.pdf](https://history-matters.com/archive/jfk/arrb/master_med_set/pdf/md163.pdf)); [WC Vol. 2, p. 132] ([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Hill.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Hill.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/hill\\_c.htm](http://mcadams.posc.mu.edu/russ/testimony/hill_c.htm)); [WC Vol. 2, p. 61] ([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Kellerman.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Kellerman.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/kellerman.htm>); [WC Vol. 2, p. 347] ([https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>))]. The pathologists remained present during this time ([ARRB MD 19, p. 6, HSCA report on 8/10/1977 interview with Humes] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md19.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md19.pdf)) [[text] (<http://www.kenrahn.com/Marsh/Autopsy/2070.TXT>); [HSCA Vol. 7, p. 243, 9/16/1977 HSCA interview with Humes and Boswell] ([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59Ia\\_HumesBosw.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M59Ia_HumesBosw.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7f.htm>)] [[audio] ([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_HumesBoswell.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_HumesBoswell.htm)); [ARRB MD 30, Dr. Finck's HSCA testimony, 3/11/1978] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md30.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md30.pdf)) [[text]

(<http://mcadams.posc.mu.edu/russ/testimony/finckhsca.htm>) [[audio] ([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_Finck\\_311.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_Finck_311.htm))]; [HSCA Vol. 1, p. 323, Humes' HSCA testimony, 9/7/1978] ([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol1/pdf/HSCA\\_Vol1\\_0907\\_7\\_Humes.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol1/pdf/HSCA_Vol1_0907_7_Humes.pdf)) [[text]([http://mcadams.posc.mu.edu/russ/m\\_j\\_russ/hscahume.htm](http://mcadams.posc.mu.edu/russ/m_j_russ/hscahume.htm))]; [JAMA, 5/27/1992]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md22.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md22.pdf)) [[text](<http://the-puzzle-palace.com/jama.htm>)]; [Humes' ARRB Deposition, 2/13/1996] ([https://www.history-fmatters.com/archive/jfk/arrb/medical\\_testimony/pdf/Humes\\_2-13-96.pdf](https://www.history-fmatters.com/archive/jfk/arrb/medical_testimony/pdf/Humes_2-13-96.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humesa.htm>)]; [Boswell's ARRB Deposition, 2/26/1996] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Boswell\\_2-26-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Boswell_2-26-96.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/boswella.htm>)]; [Finck's ARRB Deposition, 5/24/1996] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Finck\\_5-24-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Finck_5-24-96.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/fincka.htm>)]].

Humes' Warren Commission testimony then discussed how their findings related to the bruising observed on the strap muscles next to the trachea, as well as the right lung and pleural cavity. Humes did not say exactly when he developed the official conclusion.

>To complete the examination of the area of the neck and the chest, I will do that together, we made the customary incision which we use in a routine postmortem examination which is a Y-shaped incision from the shoulders over the lower portion of the breastbone and over to the opposite shoulder and reflected the skin and tissues from the anterior portion of the chest.

>We examined in the region of this incised surgical wound which was the tracheotomy wound and we saw that there was some bruising of the muscles of the neck in the depths of this wound as well as laceration or defect in the trachea.

>At this point, of course, I am unable to say how much of the defect in the trachea was made by the knife of the surgeon, and how much of the defect was made by the missile wound. That would have to be ascertained from the surgeon who actually did the tracheotomy.

>There was, however, some ecchymosis or contusion, of the muscles of the right anterior neck inferiorly, without, however, any disruption of the muscles or any significant tearing of the muscles.

>The muscles in this area of the body run roughly, as you see as he depicted them here. We have removed some of them for a point I will make in a moment, but it is our opinion that the missile traversed the neck and slid between these muscles and other vital structures with a course in the neck such as the carotid artery, the jugular vein and other structures because there was no massive hemorrhage or other massive injury in this portion of the neck.

>In attempting to relate findings within the President's body to this wound which we had observed low in his neck, we then opened his chest cavity, and we very carefully examined the lining of his chest

cavity and both of his lungs. We found that there was, in fact, no defect in the pleural lining of the President's chest.

>It was completely intact.

>However, over the apex of the right pleural cavity, and the pleura now has two layers. It has a parietal or a layer which lines the chest cavity and it has a visceral layer which is intimately in association with the lung.

>As depicted in [figure 385](<https://i.imgur.com/CVyzT7a.jpg>), in the apex of the right pleural cavity there was a bruise or contusion or ecchymosis of the parietal pleura as well as a bruise of the upper portion, the most apical portion of the right lung.

>It, therefore, was our opinion that the missile while not penetrating physically the pleural cavity, as it passed that point bruised either the missile itself, or the force of its passage through the tissues, bruised both the parietal and the visceral pleura.

>The area of discoloration on the apical portion of the right upper lung measured five centimeters in greatest diameter, and was wedge shaped in configuration, with its base toward the top of the chest and its apex down towards the substance of the lung.

[...]

>Mr. SPECTER - Now, Doctor Humes, at one point in your examination of the President, did you make an effort to probe the point of entry with your finger?

>Commander HUMES - Yes, sir; I did.

>Mr. SPECTER - And at or about that time when you were trying to ascertain, as you previously testified, whether there was any missile in the body of the President, did someone from the Secret Service call your attention to the fact that a bullet had been found on a stretcher at Parkland Hospital?

>Commander HUMES - Yes, sir; they did.

Humes' phrasing here is still kind of ambiguous, but he appears to say that their initial discovery of internal bruising did NOT cause them to abandon their earlier theory of a bullet lodging the back and falling out:

>Mr. SPECTER - And in that posture of your examination, having just learned of the presence of a

bullet on a stretcher, did that call to your mind any tentative explanatory theory of the point of entry or exit of the bullet which you have described as entering at Point "C" on Exhibit 385?

>Commander HUMES - Yes, sir. We were able to ascertain with absolute certainty that the bullet had passed by the apical portion of the right lung producing the injury which we mentioned.

>I did not at that point have the information from Doctor Perry about the wound in the anterior neck, and while that was a possible explanation for the point of exit, we also had to consider the possibility that the missile in some rather inexplicable fashion had been stopped in its path through the President's body and, in fact, then had fallen from the body onto the stretcher.

>Mr. SPECTER - And what theory did you think possible, at that juncture, to explain the passing of the bullet back out the point of entry; or had you been provided with the fact that external heart massage had been performed on the President?

>Commander HUMES - Yes, sir; we had, and we considered the possibility that some of the physical maneuvering performed by the doctors might have in some way caused this event to take place.

>Mr. SPECTER - Now, have you since discounted that possibility, Doctor Humes?

>Commander HUMES - Yes; in essence we have. When examining the wounds in the base of the President's neck anteriorly, the region of the tracheotomy performed at Parkland Hospital, we noted and we noted in our record, some contusion and bruising of the muscles of the neck of the President. We noted that at the time of the postmortem examination. Now, we also made note of the types of wounds which I mentioned to you before in this testimony on the chest which were going to be used by the doctors there to place chest tubes. They also made other wounds. one on the left arm, and a wound on the ankle of the President with the idea of administering intravenous. blood and other fluids in hope of replacing the blood which the President had lost from his extensive wounds. Those wounds showed no evidence of bruising or contusion or physical violence, which made us reach the conclusion that they were performed during the agonal moments of the late president, and when the circulation was, in essence, very seriously embarrassed, if not nonfunctional. So that these wounds, the wound of the chest and the wound of the arm and of the ankle were performed about the same time as the tracheotomy wound because only a very few moments of time elapsed when all this was going on. So, therefore, we reached the conclusion that the damage to these muscles on the anterior neck just below this wound were received at approximately the same time that the wound here on the top of the pleural cavity was, while the President still lived and while his heart and lungs were operating in such a fashion to permit him to have a bruise in the vicinity, because that he did have in these strap muscles in the neck, but he didn't have in the areas of the other incisions that were made at Parkland Hospital. So we feel that, had this missile not made its path in that fashion, the wound made by Doctor Perry in the neck would not have been able to produce, wouldn't have been able to produce, these contusions of the musculature of the neck.

[...]

>Mr. McCLOY - I am not clear what induced you to come to that conclusion if you couldn't find the actual exit wound by reason of the tracheotomy.

>Commander HUMES - The report which we have submitted, sir, represents our thinking within the 24-48 hours of the death of the President, all facts taken into account of the situation.

>The wound in the anterior portion of the lower neck is physically lower than the point of entrance posteriorly, sir.

>Mr. McCLOY - That is what I wanted to bring out.

>Commander HUMES - Yes, sir.

>Mr. McCLOY - May I ask this: In spite of the incision made by the tracheotomy, was there any evidence left of the exit aperture?

>Commander HUMES - Unfortunately not that we could ascertain, sir.

>Mr. McCLOY - I see.

([WC Vol. 2, p. 347]([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf))  
[[text](<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>)])

If the pathologists recognized, as they were examining the body, that the bruising on the strap muscles next to the trachea had been created pre-mortem, shouldn't they have realized a bullet must have passed there? Or did they only make this logical deduction in hindsight? The pathologists have never answered this question in the entire history of their statements.

The Warren Commission Report attempted to summarize the autopsy:

>The autopsy examination further disclosed that, after entering the President, the bullet passed between two large muscles, produced a contusion on the upper part of the pleural cavity (without penetrating that cavity), bruised the top portion of the right lung and ripped the windpipe (trachea) in its path through the President's neck.<sup>165</sup> The examining surgeons concluded that the wounds were caused by the bullet rather than the tracheotomy performed at Parkland Hospital. The nature of the bruises indicated that the President's heart and lungs were functioning when the bruises were caused, whereas there was very little circulation in the President's body when incisions on the President's chest were made to insert tubes during the tracheotomy.<sup>166</sup> No bone was struck by the bullet which passed through the President's body.<sup>167</sup> By projecting from a point of entry on the rear of the neck and proceeding at a slight downward angle through the bruised interior portions, the doctors concluded that the bullet exited from the front portion of the President's neck that had been cut away by the tracheotomy.<sup>168</sup>

>Concluding that a bullet passed through the President's neck, the doctors at Bethesda Naval Hospital rejected a theory that the bullet lodged in the large muscles in the back of his neck and fell out through the point of entry when external heart massage was applied at Parkland Hospital. In the earlier stages of the autopsy, the surgeons were unable to find a path into any large muscle in the back of the neck. At

that time they did not know that there had been a bullet hole in the front of the President's neck when he arrived at Parkland Hospital because the tracheotomy incision had completely eliminated that evidence.<sup>169</sup> While the autopsy was being performed, surgeons learned that a whole bullet had been found at Parkland Hospital on a stretcher which, at that time, was thought to be the stretcher occupied by the President. This led to speculation that the bullet might have penetrated a short distance into the back of the neck and then dropped out onto the stretcher as a result of the external heart massage.<sup>170</sup>

>Further exploration during the autopsy disproved that theory. The surgeons determined that the bullet had passed between two large strap muscles and bruised them without leaving any channel, since the bullet merely passed between them.<sup>171</sup> Commander Humes, who believed that a tracheotomy had been performed from his observations at the autopsy, talked by telephone with Dr. Perry early on the morning of November 23, and learned that his assumption was correct and that Dr. Perry had used the missile wound in the neck as the point to make the incision.<sup>172</sup> This confirmed the Bethesda surgeons' conclusion that the bullet had exited from the front part of the neck.

([WC, p. 88, Chapter 3: *\*The Shots from the Texas School Book Depository\**]  
(<https://www.archives.gov/research/jfk/warren-commission-report/chapter-3.html>))

The report's summary may be misleading, considering the information available to the Commission at the time. First, the autopsy pathologists never made any reference to damage observed in the "*\*large muscles\**" in the "*\*back of the neck\**". Bruising was only reported on the (relatively small) strap muscles in the front of the neck. Second, regarding the passage "*\*Further exploration during the autopsy disproved that theory\*...*", neither of the attending FBI agents, James Sibert nor Francis X. O'Neill, recalled such a change of opinion while they were present in the morgue. The summary also doesn't match Arlen Specter's report on his 3/11/1964 interview with Drs. Humes, Boswell, and Galloway, where it says "*\*They noted, at the time of the autopsy, some bruising of the internal parts of the President's body in the area but tended to attribute that to the tracheotomy at that time\**" ([page 1]([https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes\\_j\\_j\\_cdr/humes\\_j\\_j\\_cdr-0018.jpg](https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes_j_j_cdr/humes_j_j_cdr-0018.jpg))] [page 2] ([https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes\\_j\\_j\\_cdr/humes\\_j\\_j\\_cdr-0019.jpg](https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes_j_j_cdr/humes_j_j_cdr-0019.jpg))). Humes' 3/16/1964 testimony is not clear when the internal bruising made them deduce a bullet passage in the throat.

Specter himself deviated from the Warren Report's summary when [interviewed for the *\*U.S. News & World Report\** in 1966](<https://www.usnews.com/news/articles/2013/11/14/overwhelming-evidence-oswald-was-the-assassin>): "*\*when this whole picture was presented later, it was apparent that the preliminary conversations reported in the FBI document were only tentative. In fact, Dr. Humes had formulated a different conclusion, tentative as it might have been, the very next day when he had a chance to talk to Dr. Perry by telephone in Dallas [Dr. Malcolm O. Perry of Parkland Hospital, one of the doctors attending to President Kennedy]. That was when he found that there had been a bullet hole in the front of the neck, before the tracheotomy was performed. As the autopsy had gone along, Dr. Humes had found the bullet path through the body, and that led to the phone call to Dr. Perry for more information\**". But nothing from the Warren Commission confirmed that this phone call took place "the

next day" or after the body examination, just that it occurred on "Saturday morning" 11/23/1963. And the Commission gave no proof the examination ended before midnight.

**\*\*Dr. Finck and the "throat wound ignorance story"\*\***

Dr. Pierre Finck was the forensic pathologist assisting the autopsy, alongside the other two main pathologists Dr. James Humes and Dr. J. Thornton Boswell. As the witness who was most qualified to identify gunshot wounds, Finck always claimed total ignorance of a bullet passage at the tracheotomy site, during his time in the morgue.

Finck did not discuss the chronology of the body examination in his short 3/16/1964 Warren Commission testimony ([WC Vol. 2, p. 377] ([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Finck.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Finck.pdf)) [[text] (<http://mcdams.posc.mu.edu/russ/testimony/finck.htm>))]).

Between 1/25 - 2/1/1965, Finck provided a report on the autopsy to his superior, General Joseph Blumberg:

>The wound in the upper back of the President, to the right of the mid-line was oval and had a regular, soiled inverted margin. I stated that this was an entrance. My attempt to probe the path of the bullet was unsuccessful. I examined the tracheotomy skin wound and the trachea and did not find evidence of a bullet wound. Having a wound of entrance in the back and no corresponding exit, I requested a whole body radiographic survey, the results of which were negative. There was no bullet in the President's cadaver except the metallic fragments seen in the head. It was only after the autopsy that the prosecutors learned, thanks to a telephone call of Cdr. Humes to Dallas, that the small wound of exit in the front of the neck had been extended by the Dallas surgeons at the time of their tracheotomy.

[...]

>There is another wound, in the region of the right trapezius muscle, at 140 mm from the right acromion and at 140 mm from the tip of the right mastoid process ( I took these measurements ). The wound is OVAL, 7 x 4 mm, and shows well demarcated edges.

>This wound cannot be probed with the soft probe available. There is subpleural hemorrhage in the right apical mesial region. The apex of the right lung is hemorrhagic, without laceration of the pleura.

[...]



>There is a recent TRACHEOTOMY wound ( transversal incision ) with moderate hemorrhage in the subcutaneous tissue. Thanks to a telephone call from Cdr Humes to Dallas, I found out later that the surgeons in Dallas had EXTENDED THE EXIT WOUND in the anterior aspect of the neck to make his tracheotomy. The tracheotomy wound was examined by the three prosecutors. None of us noticed a bullet wound along its course. THE ORGANS OF THE NECK WERE NOT REMOVED : THE PRESIDENT'S FAMILY INSISTED TO HAVE ONLY THE HEAD EXAMINED. Later, the permission was extended to the CHEST.

[...]

>[...] These two anterior holes below the collar button correspond to the exit wound found by the Dallas surgeons at Parkland Hospital and which was extended for tracheotomy purposes. Dallas records show that the trachea had been lacerated by the bullet. WE DID NOT HAVE THIS INFORMATION AT THE TIME OF AUTOPSY.

[...]

>SUMMARY

[...]

>The wound in the upper back of the President, to the right of the mid-line was oval and had a regular, soiled inverted margin. I stated that this was an entrance. My attempt to probe the path of the bullet was unsuccessful. I examined the tracheotomy skin wound and the trachea and did not find evidence of a bullet wound. Having a wound of entrance in the back and no corresponding exit, I requested a whole body radiographic survey, the results of which were negative, There was no bullet in the President's cadaver except the metallic fragments seen in the head. It was only after the autopsy that the prosecutors learned, thanks to a telephone call of Cdr. Humes to Dallas, that the small wound of exit in the front of the neck had been extended by the Dallas surgeons at the time of their tracheotomy.

[...]

>Despite the incomplete or the inaccurate information we had at the time of the autopsy (for example, we were told that a bullet had been found on Kennedy's stretcher whereas it was on Connally's), the

autopsy conclusions were verified by other examinations, such as gross, microscopic and spectrographic study of the clothing (FBI), and by independent experiments such as those conducted by scientists in Wound Ballistics at the U.S. Army Arsenal, Edgewood, Maryland.

([ARRB MD 28]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md28.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md28.pdf)))

From Finck's 2/24-2/25/1969 testimony at trial of Clay Shaw:

>Q: Now, Doctor, did you examine on the remains of the late President Kennedy a wound in the frontal neck region?

>A: At the time of the autopsy I saw in the front of the neck of President Kennedy a transversal, which means going sideways, a transversal incision which was made for the purpose of keeping the breathing of the President, and this is called a tracheotomy, t-r-a-c-h-e-o-t-o-m-y. I examined this wound made by a surgeon, it is very commonly found in unconscious patients, the incision is made to allow them to breathe. I did not see a wound of exit at that time, but the following day Dr. Humes called the surgeons of Dallas and he was told that they --

>MR. OSER:

>I object to hearsay.

>BY MR. DYMOND:

>Q: You may not say what the surgeons in Dallas told Dr. Humes. That would be hearsay evidence.

>A: I have to base my interpretation on all the facts available and not on one fact only. When you have a wound of entry in the back of the neck and no wound of exit at the time of autopsy, when the X-rays I requested showed no bullets in the cadaver of the President, you need some other information to know where the bullet went. At the time of the autopsy there was a wound of entry in the back of the neck, no exit, no X-rays showing a bullet, that bullet has to be somewhere, so that information to me is of great importance. I insist on that point, and that telephone call to Dallas from Dr. Humes --

>THE COURT: You may insist on the point, Doctor, but we are going to do it according to law. If it is legally objectionable, even if you insist, I am going to have to sustain the objection. Do you understand me, Mr. Dymond?

>MR. DYMOND: I do.

[...]

>Q: Therefore, Doctor, am I correct in stating that at the time of your [autopsy report] (<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=3&tab=page>) that you submitted along with Commanders Boswell and Humes, you primarily based your opinion on your observations made at that particular time? Is that correct, sir?

>A: This is correct, and --

>Q: Now --

>A: And I would like to add the information obtained the day following the autopsy, which stated that there was a small wound in the front of the neck of President Kennedy and that that wound had been extended to make the surgical incision. The wound observed in the front of the neck was part of the surgical incision made by the Dallas surgeons, and I knew that at the time I signed the autopsy report.

>Q: When did you all contact the doctors at Parkland Hospital?

>A: Are you asking me if I contacted a Dr. Parker?

(Finck may have mistakenly referred to Dr. Malcolm Perry as "Dr. Parker").

>Q: No, I asked you when did you all contact the doctors at Parkland Hospital in Dallas, Texas.

>A: Oh, I did not contact them, Dr. Humes did.

>Q: And did Dr. Humes relate to you what he learned from these doctors at Parkland?

>A: Definitely.

>Q: Do you know when Dr. Humes contacted these doctors at Parkland?

>A: As far as I know, Dr. Humes called them the morning following the autopsy, as far as I know, Dr. Humes called Dallas on Saturday morning, on the 23rd of November, 1963.

>Q: Doctor, can you tell me why the delay in contacting the doctors that worked on President Kennedy in Dallas until the next morning after the body was already removed from the autopsy table?

>A: I can't explain that. I know that Dr. Humes told me he called them. I cannot give an approximate time. I can give you the reason why he called. As I have stated before, having a wound of entry in the back of the neck, having seen no exit in the front of the neck, nothing from the radiologist who looked at the whole body X-ray films, I have requested as there was no whole bullet remaining in the cadaver of the President, that was a very strong reason for inquiring if there were not another wound in the approximate direction corresponding to that wound of entry in the back of the neck, because in the wound of the head with entry in the back of the head and exit on the right side of the head, I never had any doubt, any question that it was a through-and-through wound of the head with disintegration of the bullet. The difficulty was to have found an entry in the back of the neck and not to have seen an exit corresponding to that entry.

>Q: This puzzled you at this time, is that right, Doctor?

>A: Sorry, I don't understand you.

>Q: This puzzled you at the time, the wound in the back and you couldn't find an exit wound? You were wondering about where this bullet was or where the path was going, were you not?

>A: Yes.

>Q: Well, at that particular time, Doctor, why didn't you call the doctors at Parkland or attempt to ascertain what the doctors at Parkland may have done or may have seen while the President's body was still exposed to view on the autopsy table?

>A: I will remind you that I was not in charge of this autopsy, that I was called --

>Q: You were a co-author of the report though, weren't you, Doctor?

>A: Wait. I was called as a consultant to look at these wounds; that doesn't mean I am running the show.

[...]

>Q: Did you attempt to probe this wound in the back of the neck?

>A: I did.

>Q: With what?

>A: With an autopsy room probe, and I did not succeed in probing from the entry in the back of the neck in any direction and I can explain this. This was due to the contraction of muscles preventing the passage of an instrument, and if I had forced the probe through the neck I may have created a false passage.

>Q: Isn't this good enough reason to you as a pathologist to go further and dissect this area in an attempt to ascertain whether or not there is a passageway here as a result of a bullet?

>A: I did not consider a dissection of the path.

>Q: How far did the probe go into the back of the neck?

>A: Repeat the question.

>Q: How far did the probe go into this wound?

>A: I couldn't introduce this probe for any extended depth. I tried and I can give explanations why. At times you cannot probe a path, this is because of the contraction of muscles and different layers. It is not like a pipe, like a channel. It may be extremely difficult to probe a wound through muscle.

>Q: Can you give me approximately how far in this probe went?

>A: The first fraction of an inch.

[...]

>Q: Isn't it a fact, Doctor, at the time you were performing the autopsy, or assisting in performing the autopsy, you were of the opinion the wound in the back of the President was not a through-and-through gunshot wound?

>A: At the time of the autopsy on that night?

>Q: Right.

>A: Having a wound of entry and no wound of exit, and negative X-rays showing no bullets in the cadaver at that time, the time of the autopsy, I was puzzled by the fact of having an entry and no exit. However, this cleared up after the conversation between Dr. Humes and the surgeons at Dallas who stated that included a small wound in the front of the neck in their incision of tracheotomy to keep the breathing of the President up.

>Q: On the night of the 22nd of November you did have occasion to see the wound in the area of the throat?

>A: On the skin?

>Q: Yes.

>A: No, I examined the surgical incision, but I don't recall seeing the small wound described by the Dallas surgeons. It was part of the surgical incision and I didn't see it.

>Q: You saw the incision.

>A: In the front of the neck, definitely.

>Q: You were puzzled by what you found in the back, is that right?

>A: I was not puzzled by what I found in the back, I was puzzled by having a definite entry in the back, a bruise in the plural region, that is the region of the cavity of the chest, which was bruised, between the entry in the back and the exit in the front, and the three of us, the prosecutors, we saw that bruise, and the following day knowing that a small wound had been seen in the front of the neck that made very much sense to me, an entry in the back, a wound in the front and a bruise in between due to the passage of that bullet.

>Q: On the night you had the President's body on the autopsy table, if you had dissected that particular area would you not have been able to ascertain it was a through-and-through gunshot wound?

>A: I could have, but it is a difficult question to answer for the reason you deal with many anatomical structures. Tissues are very tight, firm.

[...]

>Q: Colonel, referring to the [autopsy report of November 24, 1963] (<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=3&tab=page>), of the 25th, the report, the original autopsy report --

>A: I signed it on Sunday, 24 November, 1963 far as I can remember.

>Q: Referring to that again on in the clinical summary in Paragraph 3 you have it marked there that shortly -- in the third paragraph on of that report you state that "shortly following the wounding of the two men the car was driven to Parkland Hospital in Dallas. In the Emergency Room of that hospital the President was attended by Dr. Malcolm Perry. Telephone communication with Dr. Perry on November 23, 1963 develops the following information relative to the observations made by Dr. Perry and the procedures performed prior to death." Is that correct?

>A: Yes.

>Q: Did you have occasion, Colonel, to speak to Dr. Perry and I ask you if you did whether or not Dr. Perry classified the wound he found in the throat?

>MR. DYMOND: I object on the grounds that he never --

>THE COURT: First let's find out if the witness spoke with Dr. Perry.

>BY MR. OSER:

>Q: Did either you, Colonel, or one of your fellow members of the autopsy report speak to Dr. Perry in Dallas?

>A: I personally did not talk to Dallas, to a Dallas doctor but Dr. Humes called him after the autopsy and he told me so.

>Q: Did you have a conversation with Dr. Humes regarding what was learned in Dallas, Texas from the Dallas doctors concerning --

>THE COURT: Make it one question.

>MR. OSER: I just asked him whether or not he did.

>THE COURT: Rephrase your question.

>BY MR. OSER:

>Q: Did you talk to Dr. Humes about his conversation?

>A: I did.

>THE COURT: That breaks it down.

>BY MR. OSER:

>Q: Will you tell us whether or not you had any knowledge that the wound in the area where the tracheotomy was performed was classified as that of an entrance wound in Dallas, Texas?

>A: All I learned is that the communication was between Dr. Humes and one or more of the Dallas surgeons, maybe Dr. Perry or it may be others, but they were people taking care of President Kennedy in the Emergency Room, that there was a small wound in the front of the neck of President Kennedy and that they included that small wound of approximately 5 millimeters in diameter in their tracheotomy incision.

>Q: Did you have available to you a further description of this small wound that they found in Dallas, Texas prior to performing the tracheotomy?

>A: Outside of the location in the anterior, in the front of the neck, and the description I don't recall there was more detail about that wound found by the Dallas surgeons.

>Q: Can you tell me, Colonel, whether or not you had at your disposal any information from Dr. Kemp Clark?

>MR. DYMOND: If the Court please, we have not been objecting to hearsay but at this point any information of this type would be hearsay unless this doctor spoke with that person and even then it would still be hearsay.

>MR. OSER: I didn't ask what the content was, I asked him if he had any information available from Dr. Kemp Clark.

>THE COURT: He can say yes or no. Did you understand?

>THE WITNESS: There was a Dr. Clark mentioned. I did not talk to him.

>BY MR. OSER:

>Q: Did you have an occasion to talk to Dr. Charles Carrico from Dallas, Texas?

>A: I did not.

>Q: Do you know whether or not Commander Humes or Commander Boswell spoke to this doctor?

>A: Again I cannot pinpoint names of these Dallas surgeons with whom Dr. Humes communicated with. I know the results of the communication but I cannot say he did or did not speak to this one or that one.

>Q: Now, can you describe for me as to how large this wound was in the throat area that you saw the night of November 22, 1963?

>A: It was a long sideways surgical incision.

>Q: Could you tell me Colonel whether or not you could have taken this particular area, or the particular wound in the throat, and meshed the two sides of the incision back together again and ascertain whether or not this was a wound within the incision caused by some missile?

>A: I examined this surgical wound and I did not see the small wound described by the Dallas surgeons along that surgical incision. I did not see it.

>Q: If you did not see it then, Colonel, I take it then this was a small type of wound if it was there?

>A: According to the telephone conversation it was a small wound in the front of the neck.

[...]

>Q: Colonel, can you give me the measurements of the wound in the area of the front of the President's neck that I am pointing to here on State Exhibit 69?

>A: As I recall, it was given by the Dallas surgeons as approximately five millimeters in diameter.

>Q: Can you convert approximately five millimeters in diameter to a part of an inch for me, please?

>A: Approximately three-sixteenths of one inch corresponds to five millimeters.

>Q: Referring, Colonel, to your Summary Report, [State-67] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md14.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md14.pdf)) for purposes of identification, which you signed on 26 January, 1967, can you tell me why you did not list the size of the wound that you say is the exit wound in the throat of the President?

>A: Because I did not, I did not see that wound in the front. I did not, I don't know why it is not there.

>Q: You say you did not see it?

>A: I did not see the wound of exit in the skin. I saw a hole of exit in the shirt of the President.

>Q: But in speaking of the throat area, or skin area of the President, relative to his throat you said it was approximately five millimeters and you later said that Commander Humes received this information from Dallas.

>A: The wound that was in the front of the neck I obtained that information from Dr. Humes.

>Q: Therefore would you say, Colonel, that the wound in the back of the neck as you describe it is larger than the wound in the throat area?

>MR. DYMOND: We object to this. First of all, the Doctor testified that these are approximate measurements on wounds in the skin. Secondly, the doctor testified that he never saw the front bullet wound and consequently an answer on that would have to be based on measurements made by someone else, told to someone else, and then included in the report.

>MR. OSER: All the results, if the Court please, from two autopsy reports signed by this witness stating that -- I believe he said everything in here is true and correct when I asked him, then I asked him if he wished to change anything in here at the beginning of his testimony and he said no. I'm trying to ascertain what he told Defense Counsel on direct examination he stated this was an exit wound and I



am trying to find out whether the hole in the back is larger than the front and whether or not it is compatible with a wound from this type of bullet.

>MR. DYMOND: If the Court please, the Doctor testified what he based his conclusions on and further testified that he never did see the front wound in the neck and consequently the question is impossible of answer.

>THE COURT: He has testified he is familiar with the information received from Dr. Humes from the surgeons in Dallas, Texas and he knows it was in the report and that the information was communicated to him and he was aware of it. I understand that Mr. Oser's question is whether the entrance wound from the rear was larger than the exit wound, which was the information given by the surgeon in Dallas, Texas.

>MR. DYMOND: Your Honor has consistently ruled throughout the trial that a witness cannot relate what someone else related to him.

>THE COURT: Ordinarily, I agree but it was advised to him and he was made cognizant of it when he signed the original report, when he signed the report he either knew that as a fact which was received it from Commander Humes who received it from Dallas. I will permit the question. You are asking Dr. Finck if from the information he had whether or not the measurements of the alleged entrance wound as you wish to call it, alleged, is not larger than the information received from Dallas of the entrance wound in the front. I will permit you to ask it.

>MR. DYMOND: To which Counsel respectfully objects and reserves a Bill of Exception on the grounds this is hearsay evidence making the entire line of questioning, particularly this question, the answer to the question, the objection and ruling of the Court and the entire record parts of the bill.

>MR. OSER: Could I have the witness answer my question. Will you answer the question.

>THE WITNESS: Please repeat the question.

>THE REPORTER: Question: "Therefore, would you say, Colonel, that the wound in the back of the neck as you described it is larger than the wound in the throat area?"

>MR. DYMOND: Your Honor, that is not the question you stated you were ruling on. You said you were ruling on the question whether it was larger than the information indicated.

>MR. OSER: I will ask that question.

>THE WITNESS: Whether or not it was larger?

>BY MR. OSER:

>Q: Than the information you received from the doctors in Dallas.

>MR. DYMOND: Object now on the ground that he didn't receive the information from the Doctor.

>THE COURT: I just ruled that he signed his name to the report and under that exception I will permit the question. Do you understand the question?

>MR. OSER: Let me ask you again, Doctor --

>THE COURT: No, because then I will have to be ruling on different things if you change the question each time.

>MR. OSER: Then I'll ask that the Court Reporter read the question I asked.

>THE REPORTER: Question: "Therefore, would you say, Colonel, that the wound in the back of the neck as you described it is larger than the wound in the throat area" -- then he added the second part of the question, Your Honor, which says, "than the information you received from the doctors in Dallas?"

>THE WITNESS: I don't know 'cause I measured the wound of entry whereas I had no way of measuring the wound of exit and the wound could have been slightly smaller, the same size or slightly larger because all I have is somebody saying it was approximately 5 millimeters in diameter.

>THE COURT: We have covered it well and you can go on to something else now, Mr. Oser.

[...]

>BY MR. OSER:

>Q: Now, Colonel, also along the line of the dissecting of the throat area, you were, at the time of the autopsy, on that night I believe puzzled by what you found because you found no exit wound at that time of the hole you found in the back. Is that correct?

>A: It is.

([The State of Louisiana v. Clay Shaw, 2/24-25/1969]  
(<http://www.aarclibrary.org/publib/jfk/garr/trial/pdf/Feb24.pdf>) [[text]  
(<http://mcadams.posc.mu.edu/russ/testimony/finckshaw.htm>)]])

From Finck's 3/11/1978 testimony to the House Select Committee on Assassinations:

>Dr. WECHT. Pierre, what is your best recollection as to the time, the circumstances under which you and your colleagues Humes and Boswell first learned about the fact that the tracheotomy wound that you had seen in the Navy autopsy had been superimposed upon a bullet wound in the neck?

>Dr. FINCK. From what I remember it was a phone call from Dr. Humes to Dallas and that was after the autopsy. Does that answer your question?

>Dr. WECHT. Well, when you say after the autopsy, would that be sometime on Saturday, November 23?

>Dr. FINCK. This is someone -- Stop the tape. I will look for it.

>Dr. WECHT. If I may tell you what you said, I know you said, "I think on Saturday morning or sometime Saturday, the 23rd." If you want to find it, go ahead. I just wanted to save you some time.

>Dr. FINCK. Would it be satisfactory to say it was probably -- I know the phone call was made by Dr. Humes and we signed the report on Sunday and I would say that phone call was probably made on Saturday, the 23rd probably. Do you want me to look for it?

>Dr. WECHT. If you have it here and it is not too much trouble.

>Mr. PURDY. I am not certain that for these purposes that is particularly important. We can have him check it after the taping section.

>Dr. WECHT. All right.

>Mr. PURDY. But on the issue that that relates to I wonder if you could go into a little more detail. You say you were primarily there to examine the wounds. What area did you do in probing the area and what did you find from doing that?

>Dr. FINCK. The probing was unsuccessful.

>Dr. WECHT. Could you describe in a little more detail what "unsuccessful" means?

>Dr. FINCK. Well, you cannot go into a track when -- you know, this is difficult to explain. You can make an artificial track if you push hard enough with an instrument so you go gently to see that there is a track, and the fact that you don't find a track with a probe may be because of contraction of muscles after death.

>Dr. WECHT. Was the probe done with a metal probe?

>Dr. FINCK. That is why I said probing was unsuccessful.

>Mr. PURDY. How far into the body did the probe go before you were afraid it might create an artificial track?

>Dr. FINCK. I don't know.

>Mr. PURDY. What was your confusion that you had said -- I am not sure that you used the word "confusion." I think you used a word to describe the state of mind when you could not find the track and you could not find an exit wound and you could not find evidence of a bullet. How did you resolve that confusion that night during the autopsy?

>Dr. FINCK. By asking for the X ray films.

>Mr. PURDY. And what was the answer?

>Dr. FINCK. There was no bullet remaining in the cadaver.

>Mr. PURDY. What did you conclude about where the bullet must have gone?

>Dr. FINCK. I don't know when that news came regarding the wound of exit in the front of the throat. Part of the tracheotomy decision, I don't know.

>Mr. PURDY. Our previous testimony before the Warren Commission indicates that it was the next day, it was Saturday, November 23, when the phone call was made which was, as you said, after the autopsy which means, is it not correct, that you did not know when the autopsy was finished that there was a wound of exit in the front of the throat?

>Dr. FINCK. Probably not. That sounds all right.

>Mr. PURDY. When the autopsy was concluded, then what did you think could have happened to the bullet if it was not in the body and didn't exit the front of the body?

>Dr. FINCK. It is hard to say now but I don't know. With no bullet shown on X ray films, a wound of entry in the back, I don't know.

>Mr. PURDY. Do you recall a phone call to Dallas during the autopsy?

>Dr. FINCK. I don't know if there was a phone call to Dallas during the autopsy.

>Mr. PURDY. Did you recall any information during the autopsy that you received about a bullet being found in Parkland Hospital?

>Dr. FINCK. There was confusion along that line because someone said it was on the stretcher of Kennedy and someone else said it was on the stretcher of Governor Connolly so here we are with confusion, but I don't know when that news came.

>Mr. FLANAGAN. Excuse me. I will have to interrupt to change tape.

>Dr. WECHT. Pierre, if I may ask that one question as a corollary to Andy's, Mr. Purdy's last question, a sequel, do you recall -- not necessarily directly to you, by phone or even directly to you, but somebody addressing you about just some information that came to be accepted among the team in the autopsy room that evening that the bullet found around the stretcher back at Parkland Hospital earlier in the day, that information then relayed somehow that evening that that bullet had in some way fallen out or been forced out of the President's back by some pressure that might have been applied to his anterior chest for external cardiac massage?

>Dr. FINCK. I recall vaguely the concept yes, but now after being completed it is immaterial.

>Mr. PURDY. When you learned that on the morning of November 23 that there was evidence of a wound of exit in the front of the neck, did that in any way conflict with the conclusions you had reached during the autopsy?

>Dr. FINCK. No, because it was a wound of exit corresponding to the wound of entry. I had positively identified in the upper back/lower neck so that made a bullet track with an entry and an exit and I was satisfied.

>Mr. PURDY. If you had known during the autopsy that there was a wound of exit in the front of the throat, would you have taken or exercised any different autopsy procedures than you did do?

>Dr. FINCK. The interpretation would have been less difficult at the time. I can't say what I would have done if I had seen -- I would have asked for a whole body X ray films anyway -- anyway -- to answer your question.

>Mr. PURDY. Would you have done more extensive work in the area of the trachea?

>Dr. FINCK. From what I remember there were restrictions and this was the reason for not working in that area.

>Mr. PURDY. Did you ask that you should be permitted to examine the trachea more than you were permitted?

>Dr. FINCK. We were told to do certain things. I don't recall if someone asked for permission to. I don't recall that.

>Dr. SPITZ. May I ask something. Pierre, do you remember seeing bruising of the pleurity(?) pleura at the dome?

>Dr. FINCK. On the right side?

>Dr. SPITZ. Yes.

>Dr. FINCK. Yes, and this I would say is explained by a high velocity bullet creating what has caused a temporary cavity with a lot of concussion and disturbance of tissue.

>Dr. SPITZ. You actually saw it?

>Dr. FINCK. I think so.

>Mr. PURDY. Is there anything that you would like to add or that -- maybe confusion that has come up over the years that you have not had a chance to clear up on the record that you might like to state at this time or anything else of significance that you think you should mention to us?

>Dr. FINCK. Again I think that there were only two wound tracks, one in the back and one exit, and the front of the throat that is wound track number one and the second wound track was an entry in the back of the head with a large exit on the top and right side of the head. Although there had been rumors that shots came from the front, I did not see any evidence on the dead body of President Kennedy of wounds of entry in the front portions of the cadaver. At the time of autopsy in the autopsy report we established the number of wound tracks. We did not establish a sequence of wounds and I think that is where the motion picture film taken by an amateur is of value; it permits to say that the wounds of entry in the upper back/lower neck on the right side was wound number one and that the second projectile struck in the back of the head. That is the great value of the movie. So I think that evidence has to be used for what it is worth. The cadaver itself for the determination of the anatomic position of the wounds, my request of the whole body X ray film survey ruling out the presence of an intact bullet in the body of President Kennedy, the value of the motion picture film to establish a sequence of tracks. I think that is about all I have to say.

([ARRB MD 30]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md30.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md30.pdf))  
[[text](<http://mcadams.posc.mu.edu/russ/testimony/finckhsca.htm>)] [[audio]([https://history-matters.com/archive/jfk/hsca/med\\_testimony/audio/HSCA\\_Finck\\_311.htm](https://history-matters.com/archive/jfk/hsca/med_testimony/audio/HSCA_Finck_311.htm))])

Finck was interviewed for a 10/7/1992 article in the Journal of the American Medical Association:

>[...] In fact, the three autopsy "prosectors," as Finck likes to call the pathologists, had no information from Parkland Hospital before and during the autopsy. However, he emphasizes, "Thanks to the telephone call from Dr Humes to Dr Malcolm Perry on Saturday morning, November 23, we found out that we had been prevented from identifying the exit wound in the neck because the incision made in Dallas for the tracheostomy included the wound in the front of the neck."

([JAMA, 10/7/1992, *\*JFK's death, part III - Dr. Finck speaks out: 'two bullets, from the rear'\**]  
([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md23.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md23.pdf)))

If there is any evidence that a bullet passage in the throat was being discussed in the morgue on the night of the autopsy, that would bring Dr. Finck's honesty into question.

Finck basically recounted the same story in his 5/24/1996 deposition to the Assassination Records Review Board, but more often claimed to not remember specific details. This may be expected from a witness trying to recall what happened three decades prior. However, when asked "*\*Dr. Finck, did you keep any kind of diary or written record of events that you were involved in?\**", he replied "*\*I don't know\**". When asked again "*\*Dr. Finck, you have no idea at all whether you kept something like a diary in?\**", he said "*\*I don't remember\**" ([ARRB, 5/24/1996] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Finck\\_5-24-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Finck_5-24-96.pdf))). How could somebody forget whether or not they kept a journal?

Finck may have been hiding the truth, unless information was somehow intentionally hidden from him. An essay by former ARRB Staffer Doug Horne recounted a 6/16/1996 conversation with autopsy photographer John Stringer:

>During his ARRB deposition John Stringer testified he only recalled Navy pathologists Humes, Boswell, and himself at "the" brain exam. After his ARRB deposition, when I asked him the direct question Jeremy Gunn failed to ask under oath: "Was Dr. Finck present at the brain exam [meaning the brain exam Stringer attended, the first one]?", Stringer answered, with a wry smile on his face, and a twinkle in his eyes: "No, I don't think they wanted him there; he caused too much trouble at the autopsy." And then his ride appeared out in front of Archives II in College Park, Maryland, and he drove off without getting a chance to ask him what he meant by *\*that\**.

(Horne, *\*Evidence of a Government Cover-Up: Two Different Brain Specimens in President Kennedy's Autopsy\**, [*\*Murder in Dealey Plaza: What We Know Now that We Didn't Know Then about the Death*

of JFK\*, edited by James H. Fetzer, 2000, Part IV: \*ARRB Revelations\*]  
([http://krusch.com/books/kennedy/Murder\\_In\\_Dealey\\_Plaza.pdf](http://krusch.com/books/kennedy/Murder_In_Dealey_Plaza.pdf))

### **\*\*Semi-circular defect on the autopsy photographs\*\***

The official autopsy photographs may lead to more questions than answers. The pathologists claimed they had trouble identifying a bullet passage at the site of the tracheotomy, and yet, the pictures show what may be the outline of bullet hole in plain sight.

<https://drive.google.com/open?id=1oBvb0A9Sqge-mJVUMxtvt8bsemRTlh5Y> (NSFW) - Leaked official autopsy photographs showing the defect in the throat, alongside sketches provided by the House Select Committee on Assassinations

The photos were described in the 1968 report by the four-doctor panel appointed by Attorney General Ramsey Clark: *"At the site of and above the tracheotomy incision in the front of the neck, there can be identified the upper half of the circumference of a circular cutaneous wound the appearance of which is characteristic of that of the exit wound of a bullet. The lower half of this circular wound is obscured by the surgically produced tracheotomy incision which transects it"* ([ARRB MD 59] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md59.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md59.pdf)) [[text] (<http://www.jfklancer.com/ClarkPanel.html>)]).

And, according to the report by the twelve-doctor Forensic Pathology Panel of the HSCA: *"There is a semicircular missile defect near the center of the lower margin or the tracheotomy incision, approximately in the midline of the neck, with margins which are slightly denuded and reddish-brown"* ([HSCA Vol. 7, p. 93, 3/29/1979]([https://history-matters.com/archive/jfk/hsca/reportvols/vol7/html/HSCA\\_Vol7\\_0052a.htm](https://history-matters.com/archive/jfk/hsca/reportvols/vol7/html/HSCA_Vol7_0052a.htm))).

Dr. Pierre Finck, the forensic pathologist assisting the autopsy, said that he examined the defect in the throat and found no sign of a bullet wound. Finck stated in his 1/25 – 2/1/1965 report to General Joseph Blumberg *"I examined the tracheotomy skin wound and the trachea and did not find evidence of a bullet wound"*, *"The tracheotomy wound was examined by the three prosecutors. None of us noticed a bullet wound along its course"* ([ARRB MD 28] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md28.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md28.pdf))). When testifying at the trial of Clay Shaw, Finck said *"I examined this wound made by a surgeon, it is very commonly found in unconscious patients, the incision is made to allow them to breathe. I did not see a wound of exit at that time\*..."*, *"I examined the surgical incision, but I don't recall seeing the small wound described by the Dallas surgeons. It was part of the surgical incision and I didn't see it"* ([The State of Louisiana v. Clay Shaw, 2/24-25/1969](<http://www.aarclibrary.org/publib/jfk/garr/trial/pdf/Feb24.pdf>) [[text](<http://mcadams.posc.mu.edu/russ/testimony/finckshaw.htm>)]).

Were the photographs misinterpreted, or did the pathologists fail to represent the truth? A possible innocent explanation was suggested by James Jenkins, the autopsy's laboratory technician. In a 4/6/1991 panel discussion, Jenkins said the circular outline looked like it could have been made by the trach tube, rather than a bullet hole - *"Now, these wounds are similar to what I saw, except it was what I saw was a cleaner surgical incision on both sides. You know, one of the questions I had that I brought today was how long did the trach tube stay in? Did it stay in long enough for, you know, the body to start, you know, the rigor mortis?"*, *"The wound actually looked as if, you know, they had*

*made one long incision and that the trach tube had been inserted approximately in the middle of the wound, and that it had stayed there long enough to traumatize the area and to create an impression\*..."* ([Video](<https://www.youtube.com/watch?v=QpmMa10KNHo>), 58:18]).

### **\*\*The Barnum statement\*\***

Coast Guardsman George A. Barnum was a pallbearer on the days up to and including President Kennedy's funeral ([ARRB MD 163] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md163.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md163.pdf))).

When interviewed by researcher David Lifton on 8/20/1979, Barnum had in his possession a written account dated 11/29/1963 summarizing his version of events.

Excerpt from Lifton's 1980 book *\*Best Evidence: Disguise and Deception in the Assassination of John F. Kennedy\**:

[Part IV – *\*What, When, And Where?\**, Chapter 16. *\*Chain of Possession: The Missing Link\**]

>Next I called Barnum. He said that although he did remember there had been confusion, he could not recall the details.<sup>80</sup> But Barnum didn't have to rely on his memory for information about that night. He explained that when he reported back for duty after the funeral, his superior at Coast Guard Headquarters directed him to write a report. That officer's interest was purely historical. He knew of someone associated with the Lincoln funeral who, years later, regretted not having created a contemporaneous record. Barnum was surprised to learn that his November 29, 1963 account, which he had saved primarily for his children's benefit, contained details of interest to me.

[...]

[Part VII – *\*SYNTHESIS\**, Chapter 20. *\*The X-rays and Photographs Reconsidered\**]

>[...] In his November 29, 1963 account, Coast Guardsman George Barnum wrote that as the men were having sandwiches and coffee sometime after midnight, Admiral Burkley came in and talked to them, and said three shots had been fired, that the President had been hit by the first and third, and he described the trajectories of the two that struck:

>*\*"The first striking him in the lower neck and coming out near the throat. The second shot striking him above and to the rear of the right ear, this shot not coming out..."*<sup>61</sup>

>Although Barnum's report was incorrect on the head shot not exiting, both points of entry are those shown in the autopsy photographs, and the neck trajectory was the "transiting" conclusion to be found in the official autopsy report Humes wrote later that weekend. \*

Compare this to the statements made by Dr. Pierre Finck, the autopsy's assisting forensic pathologist. Finck claimed that it wasn't until a day later when they concluded a bullet passage in the throat.



For this statement to come from 11/29/1963, Barnum could not have been influenced by news media reports. The existence of a wound in Kennedy's "lower neck"/upper back was not public knowledge on 11/29/1963, let alone the concept of a bullet entering the back and exiting the throat at site reported by the staff at Parkland Hospital. The media first began receiving leaks after members of the FBI received the [12/9/1963 summary report](<https://www.maryferrell.org/showDoc.html?docId=10402#relPageId=1&tab=page>), which contained the reports on the autopsy from agents James Sibert and Francis X. O'Neill, and the [1/13/1964 Supplemental Report] (<https://www.maryferrell.org/showDoc.html?docId=10507#relPageId=1&tab=page>), which contained the lab results on the clothing. The first leak was a 12/12/1963 Dallas Times-Herald article by Bill Burrus headlined *\*KENNEDY SHOT ENTERED BACK\**. Burrus, citing an unnamed source, correctly reported the official autopsy conclusions, with a passage from the back to the throat, describing the back wound as being *"\*above President Kennedy's right scapula – commonly called the shoulder blade\*"* (Lifton, *\*Best Evidence\**, Part II: *\*A New Hypothesis\**, Chapter 7: *\*Breakthrough\**, *\*Distinguishing the FBI and Navy Versions\**). Burrus apparently had insider knowledge the FBI was unaware of - the Bureau said they did not obtain a copy of the official autopsy protocol until 12/24/1963 ([FBI 62-109090-29, WC HQ File, Section 1](<https://www.maryferrell.org/showDoc.html?docId=61488&relPageId=74&>); [FBI 62-109060-4236, JFK HQ File, Section 102] (<https://www.maryferrell.org/showDoc.html?docId=62389#relPageId=151&tab=page>)). In a 12/13/1963 memo, the FBI even tried disputing the accuracy of Burrus' article by citing the reports from Sibert and O'Neill which claimed the back wound had no exit ([ARRB MD 161] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md161.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md161.pdf))). Starting on 12/18/1963, more mainstream publications began running stories acknowledging the existence of the back wound (e.g. [St. Louis Post-Dispatch, *"\*Secret Service Gets Revision on Kennedy Wound After Visit by Agents, Doctors Say Shot was from Rear\*"* by Richard Dudman] (<https://www.newspapers.com/newspage/142096557/>); [Washington Post, *"\*Kennedy Autopsy Report\*"* by Nate Haseltine](<https://archive.org/stream/nsia-AutopsyJFKNotesPressClippings/nsia-AutopsyJFKNotesPressClippings/Autopsy%20Notes%20PC%20021#mode/1up>)). Thus, George Barnum probably knew more about the autopsy on 11/29/1963 than the entire FBI and news media.

### **\*\*Possible x-rays or photographs showing probes in the body\*\***

Robert Richter was the associate producer for a four-part TV special entitled *\*A CBS News Inquiry: The Warren Report\**, which aired between 6/25-6/28/1967 ([Part 1](<https://www.c-span.org/video/?453991-2/a-cbs-news-inquiry-warren-report-part-1>) [[transcript] (<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/C%20Disk/CBS-TV%20News%20Specia,%20Part%201/Item%2001.pdf>)]; [Part 2](<https://www.c-span.org/video/?454266-1/a-cbs-news-inquiry-warren-report-part-2>) [[transcript] (<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/C%20Disk/CBS-TV%20News%20Special%2002/Item%2001.pdf>)]; [Part 3](<https://www.c-span.org/video/?454599-1/cbs-news-inquiry-warren-report-part-3>) [[transcript](<http://jfk.hood.edu/Collection/Weisberg%20Subject>

[%20Index%20Files/C%20Disk/CBS-TV%20News%20Special%20Part%203/Item%2001.pdf](#)]); [Part 4](<https://www.c-span.org/video/?454598-1/cbs-news-inquiry-warren-report-part-4>) [[transcript] (<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/C%20Disk/CBS-TV%20News%20Special%20Part%204/Item%2001.pdf>)]. In a 1/10/1967 CBS internal memo to executive producer of special projects Les Midgley, Richter discloses information attributed to Jim Snyder of the network's Washington bureau. According to the memo, Snyder was acquainted with Dr. James Humes, the lead pathologist at Kenedy's autopsy. Humes allegedly told Snyder that, during the body examination, an x-ray was created which showed a surgical probe inserted from the back to the throat ([ARRB MD 16]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md16.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md16.pdf))). There is no such x-ray or photograph currently present in the official collection of autopsy materials ([ARRB MD 13]([https://history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md13.pdf](https://history-matters.com/archive/jfk/arrb/master_med_set/pdf/md13.pdf))).

The memo reads:

>Jim Snyder of the CBS bureau in D.C. told me today he is personally acquainted with Dr. Humes. They go to the same church and are personally friendly. Snyder also knows Humes' boss in Bethesda; he is a neighbor across the street from Snyder. Because of personal relationships Snyder said he would not want any of the following to be traced back to him; nor would he feel he could be a middleman in any CBS efforts to deal with Hume.

>Snyder said he has spoken with Humes about the assassination. In one conversation Humes said one X-ray of the Kennedy autopsy would answer many questions that have been raised about the path of the bullet going from Kennedy's back through his throat. Humes said FBI agents were not in the autopsy room during the autopsy; they were kept in an ante room, and their report is simply wrong. Although initially in the autopsy procedure the back wound could only be penetrated to finger length, a probe later was made---when no FBI men were present---that traced the path of the bullet from the back going downward, then upward slightly, then downward again exiting at the throat.

>One X-ray photo taken, Humes said, clearly shows the above, as it was apparently taken with a metal probe stick of some kind that was left in the body to show the wound's path.

>Humes said that a wound from a high-power rifle, once it enters a body, causes muscle, etc. to separate and later contract; thus the difficulty in initially tracing the wound's path in the case of Kennedy. Also, once a bullet from a high power rifle enters a body, its course can be completely erratic; a neck wound could result in a bullet emerging in a person's leg or anywhere else.

>Humes refused to discuss with Snyder the "single-bullet" theory in which the Warren Commission contends the same bullet described above went thru both Kennedy and Gov. Connally.

[...]

>Humes plans to retire from the navy this July and has apparently agreed to accept a \$50,000 a year job at a local suburban hospital as a pathologist. Snyder mentioned this as one indication that Humes was not "just another hack Navy doctor," as some reports have made him out to be.

>Snyder also mentioned that Humes recently spoke with a Saturday Evening Post writer (probably Richard Whalen) who promised Humes that he, the writer, would do away with the "sensationalism" of reports on the autopsy and deal with the matter accurately. However, the article--which has just come out--"ridicules" the autopsy, tries to tear it to pieces so much that Humes has since contacted an attorney and is investigating a suit against the writer and/or the magazine.

>Snyder said part of Humes' story--should Humes ever agree to be interviewed--is the followup to his autopsy, the controversy the inaccuracies, etc., as well as the facts of the autopsy itself.

([ARRB MD 16]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md16.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md16.pdf)))

The specific-sounding personal information suggests this may be a faithful record of something Humes said in private.

There was a [1/14/1967 Saturday Evening Post article]([http://www.saturdayeveningpost.com/wp-content/uploads/satevepost/9670114\\_kennedy\\_assassination.pdf](http://www.saturdayeveningpost.com/wp-content/uploads/satevepost/9670114_kennedy_assassination.pdf)) about the Kennedy assassination and autopsy, but it did not mention an exclusive interview from Humes. Humes did later appear in Part 2 of the CBS special on the Warren Report, but the alleged x-ray was not mentioned ([[Video] (<https://www.youtube.com/watch?v=C8VmRC3-lp8&t=24m59s>)] [[transcript of interview] (<https://www.maryferrell.org/showDoc.html?docId=604#relPageId=7&tab=page>))].

Former CBS employee Roger Feinman wrote, in a 11/16/1993 letter to congressman John Conyers, "*In 1976, I personally interviewed the memorandum's author, Robert Richter, who specifically recalled this incident and confirmed the memorandum's accuracy. In 1987, I tracked down Jim Snyder and interviewed him. Snyder confirmed all of the personal details he derived from his friendship with Humes as related in the Richter memo. When it came to the probe story, however, he attempted to disclaim that he had ever said anything of the kind to Richter. Because of that denial, I was unable to make use of this material until I discovered the corroborating information contained in the files of the House Select Committee on Assassinations. Neither Richter nor Snyder were ever contacted by their superiors at CBS News in the aftermath of the memorandum, and neither of them ever knew what had become of the information*" ([\*The effectiveness of Public Law 102-526, the President John F. Kennedy Assassination Records Collection Act of 1992 : hearing before the Legislation and National Security Subcommittee of the Committee on Government Operations, House of Representatives, One Hundred Third Congress, first session, November 17, 1993\*, p. 222] (<https://archive.org/details/effectivenessofp00unit/page/222>) [[text] (<http://www.kenrahn.com/Marsh/Jfk-conspiracy/CONYERS.TXT>))].

Autopsy assistant Dr. J. Thornton Boswell was asked about the memo when interviewed on 3/30/1994 by researcher Gary Aguilar, and denied that any x-rays were taken showing probes in the body:

>GA: (Referring to the CBS Memo submitted to the Conyers Committee by Roger Feinman) Snyder said that an X-ray was taken with a photo in the back -- do you remember if an X-ray or photograph was taken with a probe in the back?

>TB: "No. Jim Snyder is a very dear friend of mine. And, eh -- I don't remember. I know when he -- I don't remember anything like that -- I remember when he objected to some of the films that were shown on CBS -- because they really screwed things up too. But -- eh -- I don't remember Jim saying anything like that."

[...]

>GA: [Reads CBS memo to JB -- parts about metal probe and X-rays taken after Sibert and O'Neill left and that Sibert and O'Neill were never in the morgue, only in the ante-room]

>JB: "Well, I don't -- I don't believe that. I-I remember us probing that wound, but I don't remember an X-ray being taken. And I'm sure -- almost sure -- that one was not taken."

>GA: Sometimes when a physician relates something to a non-physician and then that non-physician passes it on to other non-physicians, things get very confused.

>JB: "There's something out of context or something, because that didn't happen." "Well, what happened was that -- eh -- and this has caused -- and in fact -- the Secret Service and FBI people were never taken out -- were never out of the, eh, morgue. They stayed there the entire time and the telephone was right by my shoulder and those guys stayed on the telephone all the time. And they were causing an awful lot of distraction. But anyway, eh, what happened was that -- eh -- we probed that wound and considered opening it actually to -- eh -- eh, demonstrate the entire length of it and so forth. And then, when we got into the chest and into the neck, we found the entire tract, it was external to the pleura. It did not go into the -- the chest cavity. But it was right at the apex of the chest cavity, and right along it, and it went from superior to inferior, back to front. And, eh, by the time that we had demonstrated, eh, at the end of the autopsy, eh, we felt it was not necessary to open the tract up, or to probe further or that sort of thing. We were perfectly well satisfied about the course of that wound."

([Transcript](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/A%20Disk/Autopsy%20JFK%20Notes%20Press%20Clippings/Item%200033.pdf>)] [[audio, partial] (<http://www.assassinationweb.com/audio1.htm>)])

At the very least, we have confirmation that Jim Snyder was indeed friends with Humes and/or Boswell.

When Humes was asked during his deposition by the Assassination Records Review Board "...*Do you recall any photograph or X-ray that was taken with a probe inserted into the posterior thorax?\**", he replied "*No, absolutely not. I do not have a recollection of such\**" ([ARRB, 2/13/1996]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Humes\\_2-13-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Humes_2-13-96.pdf))] [[text]

(<http://mcadams.posc.mu.edu/russ/testimony/humesa.htm>)). When the ARRB asked Dr. Boswell "*Were there any X-rays taken with the probe inside the body that you recall?*", he said "*No*". When asked "*any photographs taken with the probe inserted*", he said "*I doubt it*" ([Boswell's ARRB deposition, 2/26/1996]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Boswell\\_2-26-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Boswell_2-26-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/boswella.htm>)]). The ARRB asked autopsy assistant Dr. Pierre Finck was asked if he had any recollection of "*photographs being taken with probes inserted into the wounds*", and he answered "*I don't*" ([Finck's ARRB deposition, 5/24/1996]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Finck\\_5-24-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Finck_5-24-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/fincka.htm>)]). According to report by the ARRB on a 4/1/1996 interview with medical photographer John Stringer, when asked "*Do you recall any photographs or X-Rays taken while the probe was inserted in the body?*", Stringer replied "*No, I don't think so.*" ([ARRB MD 227] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md227.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md227.pdf))). During Stringer's ARRB deposition, when asked "*Did you take any photographs with probes in the body?*", he said "*Not that I can recall*" ([ARRB, 7/16/1996] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Stringer\\_7-16-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Stringer_7-16-96.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/stringer.htm>)] [[audio] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/audio/ARRB\\_Stringer.htm](https://history-matters.com/archive/jfk/arrb/medical_testimony/audio/ARRB_Stringer.htm))]). The ARRB asked Stringer's assistant Floyd Riebe "*Do you recall whether a photograph was taken while there was a probe in the body?*". Riebe answered "*I don't think so.*" ([Riebe's ARRB deposition, 5/7/1997]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Riebe\\_5-7-97.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Riebe_5-7-97.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/riebe.htm>)] [[audio] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/audio/ARRB\\_Riebe.htm](https://history-matters.com/archive/jfk/arrb/medical_testimony/audio/ARRB_Riebe.htm))]).

Only two other possible witnesses spoke of photographs (not x-rays) showing probes in Kennedy's body - Bethesda Hospital employee Dr. Robert Karnei and White House photographer Robert Knudsen. The report on Dr. Karnei's 8/23/1977 interview by the House Select Committee on Assassinations reads "*He recalls them putting the probe in and taking pictures (the body was on the side at the time)*" ([ARRB MD 61]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md61.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md61.pdf)) [[text](<http://www.kenrahn.com/Marsh/Jfk-conspiracy/KARNEI.TXT>)]). A report on the ARRB's 5/21/1996 interview with Karnei states "*Dr. Karnei said that he remembered repeated instances, during the numerous attempts to probe the back wound, when photographs were taken of a probe in the President's body (at approximately 9:00 P.M.), and seemed more certain of this recollection than of any other during his ARRB interview*" ([ARRB MD 178]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md178.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md178.pdf))). However, there is no actual proof that Karnei witnessed the autopsy – he was not listed as present in the 11/26/1963 report by FBI Agents Sibert and O'Neill ([WC D 7, p. 280](<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>)), and he was not acknowledged in the HSCA Medical Panel Report ([HSCA Vol. 7, p. 8]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M2\\_Autopsy.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M2_Autopsy.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]).

Robert Knudsen was reportedly present at the Naval Photographic Center in Washington, D.C. while the camera film from the autopsy was being processed ([ARRB MD 121] ([https://history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md121.pdf](https://history-matters.com/archive/jfk/arrb/master_med_set/pdf/md121.pdf)); [ARRB MD 124] ([https://history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md124.pdf](https://history-matters.com/archive/jfk/arrb/master_med_set/pdf/md124.pdf)); [HSCA Vol. 7, p. 23] ([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M3\\_CustodyChain.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M3_CustodyChain.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]). When interviewed by the HSCA on 8/11/1978, Knudsen claimed that he remembered seeing a photo negative showing at least 2 probes inserted into the body ([ARRB MD 135] ([https://history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md135.pdf](https://history-matters.com/archive/jfk/arrb/master_med_set/pdf/md135.pdf)) [[text] ([http://mcadams.posc.mu.edu/knudsen\\_transcript.txt](http://mcadams.posc.mu.edu/knudsen_transcript.txt))] [[audio, partial] ([https://www.maryferrell.org/pages/HSCA\\_Medical\\_Interviews.html](https://www.maryferrell.org/pages/HSCA_Medical_Interviews.html))). However, there are issues with Knudsen's credibility – When he was [featured in the August 1977 issue of \*Popular Photography\* magazine](<http://mcadams.posc.mu.edu/knudsen.txt>), Knudsen claimed that he was the one who photographed the autopsy, calling it "*the hardest assignment in my life*". Knudsen's family members told the ARRB they also remembered Robert saying this ([ARRB MD 230]([https://history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md230.pdf](https://history-matters.com/archive/jfk/arrb/master_med_set/pdf/md230.pdf)); [[Audio] ([https://history-matters.com/archive/jfk/arrb/medical\\_interviews/audio/ARRB\\_KnudsenFamily.htm](https://history-matters.com/archive/jfk/arrb/medical_interviews/audio/ARRB_KnudsenFamily.htm))]). This is not what Knudsen told the HSCA while sworn under oath. By all accounts, the autopsy was photographed by John Stringer, and there is no documented evidence that Knudsen was even there.

Here are the relevant excerpts from Knudsen's interview:

>Mr. PURDY - You stated earlier at the Naval Photographic Center you had checked the prints for quality, but not for detail. Is that true?

>Mr. KNUDSEN - Yes.

>Mr. PURDY - Did you have a chance, subsequent to that examination, to look a little more closely at the prints?

>Mr. KNUDSEN - I never saw the prints after we brought them back.

>Mr. PURDY - Did you have a chance at any time to examine the prints closely enough that you now have a recollection of what they showed?

>Mr. KNUDSEN - Oh, yes.

>Mr. PURDY - When did you examine them that closely?

>Mr. KNUDSEN - At the time that I was examining for technical quality, a lot of things were apparent.

>Mr. PURDY - What things stick in your mind about those prints? What do you recall seeing?

>Mr. KNUDSEN - Well, it was a close-up of a cavity in the head. Probes through the body --

>Mr. PURDY - Where did the probes go through the body?

>Mr. KNUDSEN - From the point where the projectile entered to the point where the projectile left.

>Mr. PURDY - Where were those two points?

>Mr. KNUDSEN - I did not say they were two points.

>Mr. PURDY - You said the projectile.

>Mr. KNUDSEN - From the entry to the exit.

>Mr. PURDY - Where were the entry and exit points?

>Mr. KNUDSEN - Here, again, I have a mental problem here that we were sworn not to disclose this to anybody. Being under oath, I cannot tell you I do not know, because I do know; but, at the same time, I do feel I have been sworn not to disclose this information and I would prefer very much that you get one of the sets of prints and view them. I am not trying to be hard to get along with. I was told not to disclose the area of the body, and I am at a loss right now as to whether -- which is right.

>Mr. PURDY - Was it a Naval order that you were operating under that you would not disclose?

>Mr. KNUDSEN - This was Secret Service. To the best of my knowledge, Dr. Berkley also emphasized that this not be discussed.

>Mr. PURDY - Do you remember seeing rulers in the photographs or anything other than the body itself?

>Mr. KNUDSEN - Yes.

>Mr. PURDY - What other things besides the body did you see, other than the rulers?

>Mr. KNUDSEN - What appeared to be stainless steel probes.

>Mr. PURDY - About how long were they?

>Mr. KNUDSEN - The probes?

>Mr. PURDY - Yes.

>Mr. KNUDSEN - I would estimate about two foot.

>Mr. PURDY - Was there one probe that you saw through the body, or were there more than one?

>Mr. KNUDSEN - More than one. Here again, we are getting into this grey area of what I was instructed not to discuss.

[...]

>Mr. KNUDSEN - I probably would recall as good now as I could later. Like I say, it has been a long time.

>Mr. PURDY - We have gone over quite a few of your recollections, and we are going to show you, in a second, the color autopsy prints that we have and ask you whether the prints that you are shown are consistent with your recollections of them when you saw them. The primary points that we are going to cover are the number and locations of wounds and the other details in the photographs that you described generally, such as the presence of metal probes in the photographs and the presence of rules in the photographs, and what have you. Are you confident now that you saw metal probes in the photographs?

>Mr. KNUDSEN - Yes.

>Mr. PURDY - Are you confident that the metal probes were actually through the wounds when you saw them?

>Mr. KNUDSEN - Yes, I am certain of that, because it showed the point of entry and exit with the probe.

>Mr. PURDY - Were there ever photographs that you have seen, either before this incident or since that incident that you might be confusing with your recollection of these photographs?

>Mr. KNUDSEN - To my knowledge, I have not seen anything regarding -- I have never seen any photographs of it other than the ones taken there.

>Mr. PURDY - Have you seen photographs of any other autopsies?

>Mr. KNUDSEN - No.

>Mr. PURDY - Have you seen photographs of any other dead bodies that may have probes in them?

>Mr. KNUDSEN - Yes, I have. I am certain on the Kennedy there were the probes showing the point of entry and exit.

>Mr. PURDY - How many probes were there that you saw in a given picture? What is the most probes that you saw in a given picture at one time?

>Mr. KNUDSEN - I know there were two.

>Mr. PURDY - Two metal probes that were through wounds when you saw them?

>Mr. KNUDSEN - Yes.



[...]

>Mr. PURDY - Thank you. As I said previously, Mr. Goff is the General Counsel of the United States Secret Service. Now, before the break we were talking about the number of probes, and you had said the most you saw in any one picture was two. I believe that is what you stated, is that correct?

>Mr. KNUDSEN - I said the minimum was two.

>Mr. PURDY - What was the most?

>Mr. KNUDSEN - Over this period of time, I am not certain. It seems to me that there were three in one picture, but this I will not state for sure.

>Mr. PURDY - Of the probes that you recall, where did they enter and where did they exit?

>Mr. KNUDSEN - One was right near the neck and out the back.

>Mr. PURDY - The front of the neck and out the back of the neck?

>Mr. KNUDSEN - The point of entry-exit.

>Mr. PURDY - The metal probe extended from the front of the neck to the back of the neck?

>Mr. KNUDSEN - Right. One was through the chest cavity.

>Mr. PURDY - Did it go all the way through?

>Mr. KNUDSEN - Yes. It seems to me that the entry point was a little bit lower in the back than -- well, the point in the back was a little bit lower than the point in the front. Put it that way. So the probe was going diagonally from top to bottom, front to back.

>Mr. PURDY - Approximately, regarding both probes, how high -- you mentioned the one was from the front of the neck, the probe extended between points on the front of the neck and the back of the neck. How high on the back of the neck, and how high or low from the front of the neck would you say for that probe?

>Mr. KNUDSEN - As I said, not studying them for technical purposes, it seemed to me that the point on the front was about this point, somewhere in this area here (Indicating).

>Mr. PURDY - Could you articulate?

>Mr. KNUDSEN - What bone is this?

>Mr. PURDY - You are pointing to a point right around the top --

>Mr. KNUDSEN - Right about where the neck-tie is. That would be somewhere in that vicinity.

>Mr. PURDY - Approximately how much lower than that would you say the other probe, which went through the chest cavity?

>Mr. KNUDSEN - I would put it six, seven inches.

>Mr. PURDY - Was it opened or closed in the photograph?

>Mr. KNUDSEN - It was a side view. I just glanced at it to make sure.

>Mr. PURDY - From the side view, you saw both probes?

>Mr. KNUDSEN - Right.

>Mr. PURDY - Where would you place the points of the probes in the back? You say one was in the neck, one was in the back. Approximately how high up, or how low?

>Mr. KNUDSEN - I would put in the back -- it would seem to me it is probably around ten inches. There, again, I do not recall the length of time. I cannot say.

>Mr. PURDY - You were kind of pointing to the middle of your back, about midway down, you would say?

>Mr. KNUDSEN - Midway between the neck and the waist.

>Mr. PURDY - Where was the other probe?

>Mr. KNUDSEN - This one --

>Mr. PURDY - You just indicated where the probe came out, on the lower --

>Mr. KNUDSEN - Somewhere around the middle of the back. It seemed to me it was right around midchest.

>Mr. PURDY - The probe that you said you could see coming out of the neck, the front of the neck, where was it out of the back of the neck? How high up would you say that one was.

>Mr. KNUDSEN - About the base of the neck. Was the body lying flat, or sitting up or lying on its front when you saw the probes through it?

>Mr. KNUDSEN - It would have to be erected to put the probes through, because on the back there was no way.

[...]

>Mr. PURDY - Is there anything that you saw that is not represented by these photographs?

>Mr. KNUDSEN - I feel certain that there was the one with the two probes.

>Mr. PURDY - One photograph with two probes through the body?

>Mr. KNUDSEN - That is correct.

>Mr. PURDY - I am referring again to Photograph No. 37 in the area that is on the right side of the photograph from your position, which is to the front of the President's body. There are some metal things vaguely in view, one which points towards the President.

>Mr. KNUDSEN - That is not it. That is not what I had in mind.

>Mr. PURDY - Could you, once again, go through the photographs looking carefully to see if there is anything in there that you might have taken to be a metal probe which was not on this examination? (Pause) Let the record show that the witness is beginning again at 26F. (Pause)

>Mr. KNUDSEN - I do not see a photograph here that covers the chest area.

>Mr. PURDY - It was your sense that it was from the side, though?

>Mr. KNUDSEN - A side view.

>Mr. PURDY - Referring to Photograph No. 40F, showing the front of the President, including the front neck region, do you see a point on the President which would correspond to one or more of the locations of the probe that you recall?

>Mr. KNUDSEN - Right here (Indicating.)

>Mr. PURDY - Could you articulate it?

>Mr. KNUDSEN - Right here -- the neck -- where the necktie would be tied.

>Mr. PURDY - Let the record show that the witness is pointing to the tracheotomy incision at the front of the President's neck. Is it your recollection, also, that there was a probe lower than that area? Is that correct?

>Mr. KNUDSEN - That is correct.

>Mr. PURDY - Looking at this photograph, approximately how much lower? Was it at a point that would not be visible in this photograph?

>Mr. KNUDSEN - I am beginning to wonder now. I do not see anything here. But it is in the back of my mind there was a probe through the body.

>Mr. PURDY - Is it your present recollection that the body was not opened up in the chest area, or could you not tell whether it was opened up, or was it definitely not open in the picture that you recall but do not see here?

>Mr. KNUDSEN - There again, I was looking quickly for quality. I did not study it. But I do not recall seeing any photograph of the chest being opened.

>Mr. PURDY - Do you think it is something you would remember, if the President's chest was cut and opened up?

>Mr. KNUDSEN - Yes.

>Mr. PURDY - Does this approximately respond to the number of color prints you recall? Mr. Knusen. That is correct.

>Mr. PURDY - It is just your recollection that there was one more, or at least one more, than is present in these? Mr. Knudsen. It seems to me that the one I saw with the probes was strictly a negative. I do not remember seeing a print of it. The first day, when we processed the film, we were just checking the negatives. I believe it was a black and white. I do not know. I believe it was the negative of the probe.

>Mr. PURDY - You think it was black and white, or you think it might have been, or you are just not sure?

>Mr. KNUDSEN - It was a negative. I do not recall ever having seen a print, but it seems to me that there was a negative, in checking the negatives.

>Mr. PURDY - Let me show you from the same photo book at the beginning, photographs of the black and white prints. Do you see if perhaps one of these might correspond to your recollection of the black and white negative that you just referred to, beginning at Photograph No. 1F? Let the record show that the witness is looking through the photographs sequentially. (Pause)

>Mr. KNUDSEN - Is this in the copy?

>Mr. PURDY - Let the record show that the witness is referring to 13F. It looks like a band of light across the lower portion of the photograph.

>Mr. KNUDSEN - In looking at the negative, you have a band here. It has been so doggoned long. If that is in the original --

>Mr. PURDY - I do not think it is in the original, because it looks like it is on something from the copies.

>Mr. KNUDSEN - I see it over here now. I do not see it.

>Mr. PURDY - You are saying you do not see it?

>Mr. KNUDSEN - I do not see it here, but in the back of my mind, it still seemed that there was one photograph, the body erect with two probes through it.

>Mr. PURDY - Let me ask you --

>Mr. KNUDSEN - One negative.

[...]

>Mr. PURDY - Was there anyone else that you know of that may have seen the negative that you are talking about that showed the probes, anyone else that we might suggest that we might talk to about that?

>Mr. KNUDSEN - No. It is just in the back of my mind I am certain that there is the one shot of the body erect, two probes through it, and I processed the black and white. I hung it up. I just quickly went down it to make sure I had everything there. I then closed the door. Jim and I stayed outside, had a cup of coffee or something while the film was drying. After it was dry, I put each negative in a four by five preserver, took it, took the color, which had also dried the same.

[...]

>Mr. PURDY - Have you had any previous experience seeing metal probes such as this so that you would know what it would look like on a negative?

>Mr. KNUDSEN - The only reason I say I thought it was a metal probe, in my recollection, it was a rod. Twenty-four inches long, probably; three-eighths of an inch diameter. It appeared to be aluminum, stainless steel. There again, it was a negative this size, hanging like this to dry.

>Mr. PURDY - You have had a lot of experience looking at negatives over the years?

>Mr. KNUDSEN - Over the years.

>Mr. PURDY - Could it have been some form of light shadow or a defect in the negative that you may have thought was a metal probe, or do you think there was actually an object, that there was a picture taken?

>Mr. KNUDSEN - I thought that there had to be something in the negative that I do not believe could have been a defect, no.

>Mr. PURDY - It did not look like an artifact of any kind?

>Mr. KNUDSEN - It did not appear that way to me. Like I say, I did not take it down and study it over a view, or anything like that. I just glanced at it. The wall was approximately this color and the negatives were hanging like this (Indicating). I just flipped them around like this (Indicating).

>Mr. PURDY - Let the record show that the witness held up some papers from the top, as though it was a negative hanging from a line, and just turned them and glanced at the papers. How certain are you that seven prints, seven sets of prints were made of the color negatives?

>Mr. KNUDSEN - That is the number that sticks in the back of my mind. Why the number seven sticks there, I do not know.

[...]

>Mr. PURDY - I should add that -- Mr. Knutsen. I will tell you one thing that would clarify it, if the negatives were available. The film pack is numbered right on the bottom at the factory, and you can go one through twelve.

>Mr. PURDY - Also, there has not been previous evidence that there were either metal probes that were extended totally through the body, or that such probes were photographed through the body. So obviously, it would be significant if your recollection were correct, and it would be of evidentiary

significance to us. I, in no way, mean to question your view, your recollection. I just want you to have it in historical perspective as to what some other say, and you may be absolutely, completely correct.

>Mr. KNUDSEN - I do not know why that one sticks in my mind. A right profile of the body. It would seem to me that if it were, as I am sure that it was, that there would have been something in the autopsy report as to the probes, and I cannot conceive in my mind why I would feel that this negative did have it. Like I said a couple of times, I did not study these things over a viewing glass like this (Indicating). As you say, it was suspended from a clothespin on a wire, a hook on a wire, and I was just flipping them this way. I do not see any picture there that would confuse with the picture, the waist-up picture.

>Mr. PURDY - If you should recall anything else, whether it is new things or elaboration or your opinions on anything change or someone should, someone's name should come to mind who might also be able to provide information, I hope you will feel free to contact us here.

>Mr. KNUDSEN - You have talked to Jim Fox?

>Mr. PURDY - Yes.

>Mr. KNUDSEN - And he did not recall any black and white negative of that nature?

>Mr. PURDY - I am not permitted to give out the substance of the investigation, but I think you can glean certain things from the nature of my questions.

>Mr. KNUDSEN - Jim is the one who apparently printed the black and white. I know the black and white did not go into the Photo Center for printing, so I would assume that Jim did it. Why this sticks in my mind, that there was one with these two probes through the body that nobody else recalls, it puts a question in my mind, and yet but I could not imagine where I could get the idea from, if I had not seen it. And yet it is starting to bother me now that there is nothing in the autopsy about it. Certainly that would be in the autopsy, if it were true. At this point, I wish I had studied the negatives rather than glance at them. At this point, I am confused why it sticks in my mind so strongly that there was this photograph, yet nobody else recalls it, and it is apparently not in any report. If it is not in any report -- I cannot conceive why it would not be in the report. If it were there -- it is really bothering me as to why it does stick in my mind so much.

>Mr. PURDY - As I said, if you, you know, desire to talk about it, or after you have thought about it some more or whatever, please feel free to give us a call and we will be glad to talk about it. We appreciate very much your taking the time and coming in, particularly since it took a lot longer than we thought it would.

>Mr. KNUDSEN - That is okay. I am trying to rack my mind on why this should stick in my mind so strongly that there was this photograph, and yet no other signs of it. It bothers me, but I cannot think of any reason that it would stick in my mind if I hadn't seen it.

>Mr. PURDY - This concludes the deposition. It is now 12:05. (Whereupon, at 12:05 p.m., the taking of the instant deposition ceased.)

([ARRB MD 135]([https://history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md135.pdf](https://history-matters.com/archive/jfk/arrb/master_med_set/pdf/md135.pdf)) [[text] ([http://mcadams.posc.mu.edu/knudsen\\_transcript.txt](http://mcadams.posc.mu.edu/knudsen_transcript.txt))] [[audio, partial] ([https://www.maryferrell.org/pages/HSCA\\_Medical\\_Interviews.html](https://www.maryferrell.org/pages/HSCA_Medical_Interviews.html)))

### **\*\*Richard Lipsey and Tom Robinson\*\***

U.S. Army 1st Lieutenant Richard A. Lipsey is one of many autopsy witness who recalled discussion of a bullet passage in the throat. Lipsey was not listed as present in the 11/26/1963 report by FBI Agents James Sibert and Francis X. O'Neill ([WC D 7, p. 280](<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>)), but he was accepted as a witness in the Medical Panel Report for the House Select Committee on Assassinations ([HSCA Vol. 7, p. 8]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M2\\_Autopsy.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M2_Autopsy.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]).

The HSCA interviewed Lipsey on 1/18/1978, at which time he marked a diagram representing how he recalled Kennedy's wounds ([ARRB MD 87] ([https://history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md87.pdf](https://history-matters.com/archive/jfk/arrb/master_med_set/pdf/md87.pdf)) [[text] (<http://www.kenrahn.com/Marsh/Jfk-conspiracy/LIPSEY.TXT>)]).

Lipsey's diagram: <https://www.maryferrell.org/showDoc.html?docId=349#relPageId=11&tab=page>

Lipsey said he remembered the pathologists discussing THREE bullets entering President Kennedy. The HSCA Medical Panel Report summarized his statements and downplayed their significance by simply choosing to reiterate the official story:

>[...] see staff interview with Richard A. Lipsey, Jan. 18, 1978, House Select Committee on Assassinations (JFK Document No. 014469), in which Lipsey stated that he recalled the doctors concluding that three missiles struck the President from behind. Lipsey said that one bullet entered the upper back of the President and did not exit; one entered in the rear of the head and exited the throat; and one entered and exited in the right, top portion of the head, causing a massive head wound.

>The committee agreed that President Kennedy suffered a wound in the upper back, a wound in the rear of the head, a massive wound in the top right side of the head, and a wound in the throat. Lipsey was wrong, however, in concluding that three shots struck the President and mistaken if he believed the pathologists reached such a conclusion. Only two shots struck the President. One entered the upper back and exited the throat. Another entered the rear of the head and exited on the top, right side of the head, causing the massive defect.

>Lipsey apparently formulated his conclusions based on observations and not on the conclusions of the doctors. In this regard, he believed the massive defect in the head represented an entrance and exit when it was only an exit. He also concluded that the entrance in the rear of the head corresponded to an exit in the neck. This conclusion could not have originated with the doctors because during the autopsy they believed the neck defect only represented a tracheostomy incision. Lipsey did properly relate the preliminary conclusion of the doctors during the autopsy that the entrance wound in the upper back had no exit. The doctors later determined that this missile had exited through the throat. Thus, although

Lipsey's recollection of the number of defects to the body and the corresponding locations are correct, his conclusions are wrong and are not supported by any other evidence.

([HSCA Vol. 7, p. 20, \*Medical Panel Report\*, Section II. \*Performance of Autopsy\*, \*References\*] ([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M2\\_Autopsy.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M2_Autopsy.pdf)) [<http://mcadams.posc.mu.edu/autopsy3.txt>])

Lipsey sometimes described the small wound in the lower back of the head as an "upper neck" wound. This may be the same wound described in the autopsy protocol as "15 x 6 mm" in size and "*situated in the posterior scalp approximately 2.5 cm. laterally to the right and slightly above the external occipital protuberance*" ([https://en.wikipedia.org/wiki/External\\_occipital\\_protuberance](https://en.wikipedia.org/wiki/External_occipital_protuberance))" ([WC D 77] (<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=3&tab=page>) [<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>])). The location of the small head wound on [Lipsey's diagram] (<https://www.maryferrell.org/showDoc.html?docId=349#relPageId=11&tab=page>) can be compared with the [face sheet diagram] (<https://i.imgur.com/fxzGGOP.png>) created during the autopsy ([ARRB MD 1] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md1.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md1.pdf))). Officially, this was an entrance wound which connected to an exit on the top-right side of the head, as demonstrated in [CE 388] (<http://jfkassassinationuk.com/wp-content/uploads/2018/11/Rydberg-Warren-Commision-Drawings.jpg>) ([WC Vol. 16, p. 984] ([https://www.history-matters.com/archive/jfk/wc/wcvols/wh16/pdf/WH16\\_CE\\_388.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh16/pdf/WH16_CE_388.pdf)))), one of the drawings made by medical illustrator Harold Rydberg under the direction of lead autopsy pathologist Dr. James Humes ([WC Vol. 2, p. 347] ([https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>])).

Here are the relevant excerpts from Lipsey's interview:

>Q: Getting back to the beginning stages of the autopsy, or even before the actual autopsy began, do you recall when the x-rays were taken, the x-rays and photos?

>LIPSEY: Yeah, well as far as the exact x-rays were taken, no I don't recall. I do recall the comments from the doctors, you know, who started examining the body before they did anything, you know, looking at the body, looking at where the bullets had entered the back of the his head. It was obvious that one bullet entered the back of his head and exited on the right side of his face and pretty well blew away the right side of his head. And then the other two bullets had entered the lower part of his neck and the best of my knowledge, or the best of my memory, one had exited. The other bullet had entered from behind and hit his chest cavity and the bullet went down into the body. And during the autopsy, this is the only part that I can imagine would be of any--really, what I've told you right there, of strictly confidential nature that was never written up anywhere. And I presume, am I right, that this tape and this conversation is strictly confidential? You know, it's not going to be published I guess is what I'm getting at?



>Q: It's not going to be published during the term of this committee. During 1978.

>LIPSEY: Okay, Well, is that as far as I can remember, and I'm pretty positive about it, they never found that third bullet. It did not exit the body. When they did the autopsy first they cut the top of his head off and then they cut his chest open, you know, and they got all of his insides out, that was the only gory part, they took them out a piece at a time and laid them up on, I remember, a beautiful clean stainless steel rack with water pouring over it all the time. I imagine to keep it fresh or whatever. They did the whole autopsy then they came back and, you know, sliced up all the organs.

>Q: For slides?

>LIPSEY: I don't know what they were using them for. They were taking pictures of them, they, you know, and they were examining them. I don't know whether they were taking them for records or not. I don't think the doctors, to be perfectly frank, I don't think it ever entered the doctors' minds that they were taking pictures for a formal investigation. They were doing an autopsy, a complete autopsy, and whatever physical records that you maintain during an autopsy was what they were doing. I know they did a very thorough job because every time one of them would say something the other one would question it. I can remember they looked at this one organ and they passed it around and all three discussed it before they would go on to the most part. You know, it wasn't one guy doing his operating on the feet, one on the chest, and one on the head. They did everything together and re-examined everything together. I remember that distinctly. They looked like one of the most efficient teams doing anything that I've ever seen. But anyhow, like I say. I can remember lifting his chest cavity and then the top of his head off, and you know, all the internal organs out. And I can remember them discussing the third, third bullet. First, second and third bullet. The third bullet, the one they hadn't found. Their only logical explanation was that it hit him in the back of the head, hit his chest cavity and then, like bullets will do--I am sure you are familiar with that one, you could shoot somebody, no telling where the bullet is going to and up--probably hit his chest cavity and could have gone all the way down into his toe. You know, it could have just hit and gone right down into his leg or wherever. But I don't think, to the best of my knowledge, they ever found the third bullet.

>Q: Did they find any other bullets?

>LIPSEY: This is what I'm getting back to. I don't know that they found bullets or whether they found just particles of bullets. I don't think they know. I don't think they found any whole bullets. But that is just strictly speculation on my part. I remember they were bound and determined to find that bullet because it didn't have an exit mark. But I don't think they ever found the bullet. The one that hit his chest, the one that exited here -- [corrects himself] entered here; there was no exit hole. So the bullet was somewhere in his body, obviously.

>Q: When you say "entered here" referring to?

>LIPSEY: The lower back of the neck.

>Q: Lower back.

>LIPSEY: From the angle they were talking about it had to come from quite a height because they were looking and talking to each other the angle they were pointing that had hit him had to be a down angle. Also all of them, their entire discussion -- I never entered the discussion and neither did Sam Bird. We

were sitting there watching and listening. And we weren't asked our opinion, for obvious reasons. We wouldn't have known what we were talking about. We never entered in any conversation with the docs or offered any information except when we were talking.

And I didn't personally think, personal opinion, from listening to the doctors, watching the autopsy, there was no question in their minds that the bullets came from the same direction that all three bullets came from the same place at the same time. They weren't different angles. They all had the same pattern to them.

>Q: Okay, getting back to the bullets themselves, not the bullets themselves but the entrances, can you just go over again the entrances as you remember them?

>LIPSEY: Alright, as I remember them there was one bullet that went in the back of the head that exited and blew away part of his face. And that was sort of high up, not high up but like this little crown on the back of your head right there, three or four inches above your neck. And then the other one entered at more of less the top of the neck, the other one entered more of less at the bottom of the neck.

>Q: Okay, so that would be up where the crown, not the top of the head?

>LIPSEY: Yeah, the rear crown.

>Q: Where that point might be on the skull bone?

>LIPSEY: Exactly.

>Q: Then one approximately several inches lower?

>LIPSEY: Well not several but two or three inches lower.

>Q: Still in the head? Or what we would call...

>LIPSEY: Closer to the neck.

>Q: Closer to the neck? And than one in the neck?

>LIPSEY: In the lower neck region.

>Q: In the back?

>LIPSEY: Yeah, the very -- right as the ....

>Q: Let's go back over things. Sometimes visual aids you forget. Okay, and then according to the autopsy doctors they feel the one that entered in the skull, in the rear of the head, exited the right side of the head?

>LIPSEY: The right front, you know, the face. Not the right top, the right front. The facial part of your face. In other words...

>Q: Did that destroy his face at all? You say Presidents Kennedy, was his face distorted?

>LIPSEY: Yeah, the right side. If you looked at him straight. If you looked at him from the left you couldn't see anything. If you looked at him from the right side it was just physically part of it blown away.

>Q: So that would be right here?

>LIPSEY: Yeah, behind the eye and everything.

>Q: Behind the eye? Was it all hair region or was it part of the actual face?

>LIPSEY: To the best of my recollection it was part of the hair region and part of the face region.

[...]

>Q: Now getting back, we just went over the three entrances and what the doctor's stated were entrances. To refresh your memory, the first doctor was Dr. Humes...is the chief pathologist...

>LIPSEY: [Talking over questioner] I met the doctors when it first started except when I read their names -- I don't know them then; I don't know them now -- on a personal basis. Nor I never talked to them before, during or afterwards.

>Q: You do recollect Commander Humes?

>LIPSEY: Yes. Okay, the only thing I remember there at times was another, it wasn't a doctor. It could have been a doctor. I know there was an assistant or an aide doing things for them during different periods.

>Q: Getting back to the entrances you just stated one exit you believed was on the right hand side of the head. Now what about the other entrances, what about the corresponding exits if there were any? Let's clarify that a little more. For starting, one...

>LIPSEY: The bullet entered lower part of the head or upper part of the neck. [long pause] To the best of my knowledge, came out the front of the neck. But the one that I remember they spent so much time on, obviously, was the one they found did not come out. There was a bullet -- that's my vivid recollection cause that's all they talked about. For about two hours all they talked about was finding that bullet. To the rest of my recollection they found some particles but they never found the bullet -- pieces of it, trances of it. The best of my knowledge, this is one thing I definitely remember they just never found that whole bullet.

>Q: What was it you observed that made you feel that exited -- the bullet that entered the rear portion of his head exited in the throat area?

>LIPSEY: The throat area. Right. The lower throat area.

>Q: What, were there markings there that indicated that the doctors came to that conclusion?

>LIPSEY: I saw where, you know, they were working and also listening to their conclusions.

>Q: And it's your recollection at that time was that the doctors definitely felt the bullets came from the one area, same area, same time?

>LIPSEY: Yes, they talked about that. It never seemed to be any doubt in their mind the bullets were coming from different directions at all.

>Q: It's been a long time but do you recall any reasons they gave?

>LIPSEY: Because of the angle. I remember that's how they kept talking about the angles of the bullets because the angles that they entered the body. That's why, they, I remember, measuring and doing all kinds of things. They turned the body up at one point to determine where that bullet that entered back here that didn't have an exit mark. Where was that bullet? And so when it got to down to where they thought it hit his chest cavity, they opened him up and started looking in here. That's why I remember one thing, they took, after they had taken all his organs out, during the autopsy they had them sitting up there: "Now let's see if we can find the bullet." They cut all his organs apart. I don't know what they did with them, I don't remember but they put them in some kind of containers. I don't remember but they put them in containers.

[...]

>Q: Did the doctors in that preliminary examination find all the wounds you have described?

>LIPSEY: I'm sure they must have. They were visible.

>Q: To follow that up, the wounds that you describe, was that based on hearing the doctors calling out that this is a wound, this is a wound? Or was that based on your visible sight when you saw the body?

>LIPSEY: Both. Because, I could see the body, I could see the rear. I could see obviously the side of the face. Although that's just when I walked in they took him out the casket -- I saw that. Beside the side wound, because when I went back and sat down, they laid him down to right. The way they laid him I was looking at the left side of his body as opposed to the right side of his body. I remember I could see the blood at the throat area, and in the neck area. As for as me getting down and looking at the exit hole in the front, all I could see was the blood. What I'm talking about is what I heard in conversation from them, from then on.

>Q: To follow that up, as you should well know because I take it you do hunt a lot, locating wounds in hair is very difficult. The sighting. Did you visibly see the wounds in the back of the head, what you feel were the entrance wounds? Was based on what the doctors stated that we know their opinions...

>[LipseY is interrupting with "No...That's...No."]

>LIPSEY: No. That's...No. I hope I'm not contradicting myself. But at this point, there again, like I said, it's been a long time. I feel that there was no really entrance wound --maybe I said that --in the rear of his head. There was a point where they determined the bullet entered the back of his head but I believe all of that part of his head was blown. I mean I think it just physically blew away that part of

his head. You know, just like a strip right across there or may have been just in that area -- just blew it out..

>Q: So you say the damage caused by the entrance and the exit of the bullet to the head caused one large hole?

>LIPSEY: To the best of my recollection, yes it did. But one, the other one went in the back of the neck. Like a say, I saw the blood spots and what have you, but they weren't tremendous, not a blow-away like this. But, of course, what little I know about it, which isn't a hell of a lot, your bone is right there, so when it hit it, the bullet probably expanded, hit something solid and ripped. But here, it went in to tissue before it hit anything.

>Q: Was there any discussion of the nature of the bullet which caused the head wound?

>LIPSEY: No. To my recollection, no there wasn't.

>Q: Was there any discussion that it would take a certain kind of bullet to cause that kind of damage?

>LIPSEY: If it was done, it was probably, I'm thinking, it was probably done in the privacy of the doctors after the autopsy. I don't remember -- and I'm sure it must have been mentioned during the autopsy but I'm not going to say yes or no because I don't have any idea. I don't remember that at all.

>Q: During the autopsy, did you discuss with anyone else in the room the nature of head wounds. Or the causes of them?

>LIPSEY: No. Not really. Sam and I... We just talked about different things. We talked about Kennedy, talked about how many times he had been shot. I don't think we ever discussed anything in relation to what the doctors were saying about the wounds.

>Q: Could you describe for us the nature of the damage to the front of the neck?

>LIPSEY: No. I really couldn't. Because like I say, when we got it out, there was -- blood was all over the body. It was almost caked on. I remember they took a scrub brush and a pail. One of his arms, and if I've not mistaken, it was his left arm. You know, the way, I guess, after he died, finished the autopsy by that time and, rigor mortis had set in and one of his arms was slightly higher. Well, the guy's laying down and one of them was up a little bit. So when they started the autopsy I can remember, one of the doctors, when he was starting to clean the body up, got up on the table and physically got up on the table and put his knee down on his arm to hold it down -- to get it out of his way -- so he could scrub the rest of the body. So to say, to describe the hole to you, no. Because it was so messy and so much blood that I didn't, I never got close enough to get down and look at the wound itself.

>Q Can you give us an rough estimate, compared it for example to the wound in the head and the wound in the back...

>LIPSEY: It was much smaller, very much smaller.

>Q: ...Than the head wound...

>LIPSEY: Than the side head wound.

>Q: What about the wound on the back?

>LIPSEY: There again the wound in the back of the head, all I saw of that wound was when they turned him on his side. And saw the blood when they were cleaning him off, cutting, and doing the thing. I couldn't possibly describe to you the relation to the size. I don't remember and I doubt that I saw it close enough to describe it to you.

>Q: Do you remember whether the doctors describing the wound in the neck as being caused by anything other than a bullet?

>LIPSEY: No.

>Q: Do you remember discussions on whether or not there was a tracheotomy incision?

>LIPSEY: [Long Pause.] No. I guess anything I do remember something about that -- I remember it would have to come after reading about what went on in Dallas. I just don't remember discussing that.

>Q: What have you read about Dallas? About that front neck wound?

>LIPSEY: It's been so long. Like I say, I'm glad I hadn't. I'm glad I didn't go back over any articles and read because I don't even remember.

>Q: You don't recall whether there was a tracheotomy in the front of the neck?

>LIPSEY: Absolutely not.

>Q: Well, you say you didn't you hear the doctors discuss that. Did you explicitly hear the doctors say that the wound in the front of the neck was caused by a bullet?

>LIPSEY: If you want to get down to specifics: no. The only thing I do remember was when they kept talking about the entrance in the back of the neck and looking at the hole in the front of the neck. To the best of my knowledge they were convinced that a bullet came out the front of the neck. And that's how they were determining where to look for the other bullet -- by the angle it went in at the back and came out at the front. Where to look at the other one.

>Q: Oh, the angle where it came in the head -- looking out the front of the neck -- using that angle...

>LIPSEY: Right. Right. [Interrupting] To determine where to look for the other one, I presume from what they were looking at, both entrances looked to be the same.. In other words, both entrances -- the angles were the same were on both entrances, or the sizes of the holes probably was the same -- and in the front. I'm not going to stand here and make up a story, make it sound good, I just don't remember whether they discussed the size of a trach hole or it in relation to where a bullet might have exited.

>Q: How much time would you say, relatively speaking, did the doctors spent on the 3 wounds you described? Did they spend more time on one or the other of the wounds?

>LIPSEY: They spent more time looking for that other bullet than they did on anything else.

>Q: You're describing the bullet that went in...

>LIPSEY: ...on the lower part of the neck. I remember them saying it must of hit the chest cavity and ricocheted down somewhere into the body.

>Q: Do you remember any discussion...

>LIPSEY: And they spent a lot of time on that. Because I remember when they cut him open in the front, you know, they -- I remember -- "Let's look for this, let's look for this." They took all the organs out, they went through, they cut the organs up looking for bullets. And finally, to the best of my knowledge, and I remember this, I don't remember how much more they did after this, but I remember them saying: "That bullet could be anywhere." It could have gone right down to his heels or his toes. It could have ricocheted and traveled right down through right on down, you know, through his insides.

>Q: Do you remember any discussion among the doctors that the bullet could have entered lower in the neck -- lower back part of the neck exited in the front of the neck?

>LIPSEY: Yeah. I remember they were firmly convinced it did not.

>Q: Okay. So you're convinced...

>LIPSEY: That's why they spent so much time looking for it. They traced it through the back of his neck through, you know, when they did the autopsy, through the inside of his body and there was no where the bullet was then where it should have exited, it was not. And at the angle it was traveling, and from, you know, with the other things they saw visible in the chest area once they cut him open, you know, it had started down, but where was it?

>Q: When they opened up the body from the front, did -- were they able to discern any part of the track of the bullet?

>LIPSEY: I'm convinced they were in the upper part of his body -- yes -- because that's how they started following it. And then I think, that's when they started taking his organs out, you know, one at a time only. They took all of the insides out, I remember that, boy. They had four or five piles of insides sitting on the table. And they thoroughly examined each one of those. They just had a big hollow chest and stomach cavity left -- or particularly chest cavity, when they got through. And, I'm very convinced, in my own mind, that they were very convinced that bullet was somewhere in him.

Because, from their conversations, they tracked this bullet as far as they could in a downward position before they couldn't tell where it went. That's when they started taking organs apart and looking where ever they could look without going ahead and just cutting him apart. And I think their decision finally was, we're just, you know, not going to completely dissect him to find this bullet. So they tracked the bullet down as far as it went. Obviously, by that point it wasn't that important.

>Q: When they opened up the chest, when you say they saw part of the track of the bullet, did they take a photograph of that?

>LIPSEY: Can't tell. I honestly do not know.

[...]

>Q: Do you remember any of the autopsy doctors probing any of the wounds?

>LIPSEY: Not, no, I really can't say. They were doing everything so I don't... I can say they must have, I'm not going to say they did. I remember, the wounds, looking for the bullet, were their primary concern.

>[Interruption by intercom]

>Q: Do you remember any discussion when they were trying to find out where the bullet went -- of the possibility that the bullet had gone in the back and had fallen out of the body? In other words, a non-exited bullet remained in...

>LIPSEY: [Interrupts] No. There was no possibility, there were no other holes it could have fallen out.

>Q: That's what I mean -- Did they discuss...

>LIPSEY: [Interrupts] ...to the rear. In other words...

>Q: [Talking over Lipsey] That's what I mean. Fell out of the entrance.

>LIPSEY: The bullet has penetrated. It went into his skin. There was evidence of it inside his body. It had penetrated the body. There was no way it could have fallen out.

>Q: Was there any discussion because of external cardiac massage from the front when he was face up it could have fallen out?

>LIPSEY: No. There was no discussion of that that I recall.

[...]

>Q: I have a sketch here from the autopsy face sheet we'd like you to place, you can do it in pencil first and then in pen or just in pen, any wounds you recall.

>LIPSEY: okay

>Q: This sketch is a blank drawing of a body, a male body.

>LIPSEY: Like I said, to the best of my knowledge somewhere in that area and in that area.

>Q: Could you label them as of whether they are of entrance or of exit?

>LIPSEY: Alright. [writing and speaking] Part blown away. Entrance and entrance. To the best of my... let's see it would be the right side of his face. That area in there. Once again, that area was kind of blown away.

>Q: Is that area the same area?



>LIPSEY: Same area. And there was a hole -- you're talking about at tracheotomy. As far as I remember they were talking about it being a bullet hole. [writing and speaking] Exit. Exit.

Lipsey then spoke as if he was unaware this information disagreed with the official story:

>[...] The only thing, and it's certainly not going to hold up under any court of law-type thing. But, I can remember when the Warren Commission was formed. Everybody's writing books about it. All the comments on how many times he was shot and the angles. I remember Walter Cronkite doing this big CBS thing on who shot him -- how many directions it came from. I can remember vividly in my mind on literally hundreds of occasions, saying these people are crazy. I watched the autopsy and I know for a fact he was shot three times. And the doctors were firmly convinced they all came out of the same gun because of the type of wounds or the entrances, whatever. I wish I could be more specific. I remember going back to the autopsy. I can remember specifically the next week, the next month. Over the period of the next year or so. Which was when I really remember what went on in the room. These people were crazy.

>I can remember in my own mind, they're trying to read something into it that didn't happen. One book came out that he was shot from three different angles, another report came out he was only shot once, another that he was shot seven times. All kinds of...Everybody had their own versions of what happened, how many sounds they heard, and the angles of the fire they came from. I definitely remember the doctors commenting they were convinced that the shots came from the same direction and from the same type of weapon -- and it was three shots.

>Q: Did they also feel --did the doctors state that three separate bullets had struck?

>LIPSEY: This is one other thing, that to the best of my memory, today, and remembering what I thought about when all these reports came out absolutely, unequivocally yes, they were convinced that he had been shot three times.

>Q: It's unclear to me from the sketch that you did where there are three bullets.

>LIPSEY: One on the right side of his head, one on the upper point of his neck and one on the lower part of his neck.

>Q: Well, on your sketch, you labeled two points as points of entrance.

>LIPSEY: One point was just blown away. This point was just blown away. I just can't remember whether there was a point of entrance and then the blown away part or whether it -- he must have been sitting like this and it hit like this and went in just blew that away or if it ripped the whole section away.

>Q: Either of those two possibilities means one bullet to the head, I think.

>LIPSEY: Right. One bullet to the head.

>Q: Right.

>LIPSEY: Then one bullet to the lower head.

>Q: Oh. Then where did that bullet exit?

>LIPSEY: That's the bullet that exited right here.

>Q: The throat.

>LIPSEY: Throat. Then the lower entrance that did not exit. If that's confusing, ask me again and we'll go over it. Do you understand it? What I'm talking about so far? One bullet, right on his head. The bullet was coming out like this --

>Q: The question is, the bullet wound that you're referring to right hand side of his head,

>LIPSEY: Right.

>Q: Did that, did this wound, which you describe as a large blasting out, did that have a separate corresponding entry wound or did the doctors believe that was all of one wound?

>LIPSEY: That was all part of one wound.

>Q: Could it have been part of that lower wound on the head that you labeled?

>LIPSEY: Oh no. Absolutely not.

>Q: Because, earlier when I asked you about the blown away portion, I got the impression that when you were saying you weren't sure whether it entered and then blew away a portion or whether the entrance and exit were part of the same hole.

>LIPSEY: You're right. I wasn't. This was distinctly a separate wound beside, in relation to these two.

>Q: Did the doctors conclude [laughing] that was there a two separate wounds was there a track between the two of them?

>LIPSEY: The doctors concluded, the conclusion of the doctors was there were three separate wounds.

>Q: And three separate bullets.

>LIPSEY: And three separate bullets. No question in my mind about that. Can I ask you a question at this point?

>Q: You can ask us but we may not be able to answer it for you.

>LIPSEY: I think it will be a very simple question that I think you could answer. There's gotta be something to do with it. Why don't they exhume the body and study the body?

>Q: We'll that's a question we can't answer.

[...]

>Q: On this sketch could you add a further identification where you say "part blown away." That's my confusion.

>LIPSEY: Okay. [writing and speaking out loud] Entrance of bullet #2 and entrance of bullet #3.

>Q: When you say "wound #1, why don't you say...

>Q: [All speaking at once] That, to you, represents entrance of bullet #1.

>LIPSEY: That would represent...No. Not in sequence. The bullet #1 may have been this bullet and that may have been #2. I don't remember the sequence.

>Q: Of course. But for the purpose of this paper, that could be the sequence.

>LIPSEY: [writing and speaking out loud] Entrance and exit --

>Q: Entrance and exit.

>LIPSEY: Exit of bullet #1. This would be entrance of bullet #2. Entrance of bullet #3. Not in order.

>Q: Just write "For identification."

>LIPSEY: [writing and speaking out loud] For identification. This same area blown away as...

>Q: Wound #1.

>LIPSEY: [writing and speaking out loud] Wound #1. [then different notation] Exit point of wound #2.

>Q: Now, let me ask you this to clear up, I think we stated this explicitly, but, the point on the sketch labeled as point on entrance wound #2, did you in fact see that hole?

>LIPSEY: All I saw was when they turned him over on his side, we took him out of the boxed coffin that they brought him from the hospital, he was laying on his back, they laid him on the table. When I saw him is when they turned him on his side and I saw it from a distance of 20ft, 15ft I saw the big blood area. I did not get any closer look at the hole than that.

>Q: But [tape missing a few words] of the doctor.

>LIPSEY: [writing and speaking out loud] [writing and speaking out loud] And what I could see relatively from where I was sitting that's about the position of it. Yes.

>Q: So essentially, the doctors said there were two bullet wounds to the head. Is that correct?

LIPSEY: Not really, not considering if you want to consider this a head or a neck wound. I consider it more of a neck wound and I believe in their discussions they discussed it more of a neck wound. I consider my wound #1 is the head wound. I consider this wound #2 on a Upper neck/lower part of your head

>Q: Was it in the hair, hairline?

>LIPSEY: Yes. It was in the hair, but the lower hairline.

>Q: It was in the hair?

>LIPSEY: Just a minute. Wait. I'm considering where my hairline is today. Like I say, it was just a blood smash area back there. It could have been in the part that you sort of shave right up there. But lower head still, but upper neck. But the third one definitely was the lower neck, upper vertebrae.

([[Transcript]([https://www.history-matters.com/archive/jfk/hasca/med\\_testimony/Lipseys\\_1-18-78/HSCA-Lipseys.htm](https://www.history-matters.com/archive/jfk/hasca/med_testimony/Lipseys_1-18-78/HSCA-Lipseys.htm))] [[audio]([https://www.history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_Lipseys.htm](https://www.history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_Lipseys.htm))])

Decades after speaking about three bullets striking President Kennedy, Lipsey reemerged in various media interviews to promote the official version of events ([225 Magazine, 8/31/2009, \*A Witness To History\*](<https://www.225batonrouge.com/article/a-witness-to-history>); [Country Roads Magazine, 10/19/2013, \*Eyewitness to the Autopsy of JFK\* by Ruth Laney] (<https://countryroadsmagazine.com/art-and-culture/history/eyewitness-to-history/>); [Times-Picayune, 11/20/2013, \*Baton Rouge man recounts JFK autopsy and mentor who brought him to history's front row\* by Chelsea Brasted] ([https://www.nola.com/politics/index.ssf/2013/11/baton\\_rouge\\_man\\_recounts\\_jfk\\_a.html](https://www.nola.com/politics/index.ssf/2013/11/baton_rouge_man_recounts_jfk_a.html)); [Daily Reveille, 11/21/2013, \*BR man guarded Kennedy after assassination\* by Laura Furr] ([http://www.lsunow.com/br-man-guarded-kennedy-after-assassination/article\\_a959dcd4-531d-11e3-a147-001a4bcf6878.html](http://www.lsunow.com/br-man-guarded-kennedy-after-assassination/article_a959dcd4-531d-11e3-a147-001a4bcf6878.html)); [Interview by Jim Engster, WRKF, 11/22/2013] (<https://www.youtube.com/watch?v=DXjK3Mv9cE&>); [11/23/2013 interview by Bill Scanlan, C-SPAN] (<https://www.c-span.org/video/?316428-1/richard-lipseys-autopsy-president-kennedy>); [TEDx talk with Stacia Haynie, 6/20/2018] (<https://www.youtube.com/watch?v=A076wKnFzBs>)).

Lipseys's statements to the HSCA may have some corroboration from Tom Robinson, one of the morticians from Gawler's funeral home. Robinson claimed that, while waiting the morgue, he remembered the pathologists inserting a surgical probe into the "base of the head". Although Robinson did not describe seeing the small head wound reported by the pathologists, maybe this was the defect he saw them trying to probe.

From Robinson's 1/12/1977 interview by the HSCA:

>Purdy: Tracheotomy. Did you ever hear any discussions that would have indicated why that was the case or what might have caused that, caused obviously the tracheotomy occurred prior to the time the body came there?

>Robinson: Yes, those things are done very quickly. By nature of the situation, but it was examined very carefully. The throat was. All that was removed.

>Purdy: Was it your understanding that that was just a tracheotomy. Or was there some other cause that may have made it ragged or something else?

>Robinson: There is something about the bullet exiting from there. A bullet exiting from there. I don't know whether I heard the physicians talking about it or whether I read it now.

>Purdy: What was your impression at the time or now thinking about it as to, if you assume a bullet or part of a bullet exited there, or something exited there. Where did that something come from? Where would it have entered from the other side? From the your examination of the body, where could it have come from?

>Robinson: You mean you're looking for another hole?

>Purdy: Another hole or some other place, either coming from the head down and out or from the back.

>Robinson: It might have been coming from the head and down. These are all in straight lines here coming down like that.

[...]

>Purdy: Specifically, when you say the body, you saw the back, I want to know specifically if either you know there was not a wound from the head down to the waist anywhere on the back, neck or whatever, or that the autopsy work may have either obliterated it or made it not evident to you that there was such a wound?

>Robinson: It might have done that, there was...but the back itself, there was no wound there, no.

>Purdy: Were there any wounds in the neck, the back?

>Robinson: Now this is where I'm hazy. I can remember the probe. The probe of all this whole area. It was about an 18 piece of metal that we used.

>Purdy: Do you feel they probed the head or they probed the neck?

>Robinson: It was at the base of the head where most of the damage was done, the things that we had to worry about. So it all runs together in my mind.

>Purdy: Did they probe with anything other than the 18 probe, either prior to or after the use of that probe? Did they use a shorter probe?

>Robinson: I don't remember, I remember them probing.

>Purdy: What is your impression as to either how far or in what direction they probed with that probe?

>Purdy: Or any direction about the actual probing to indicate either the direction or the depth?

>Robinson: I remember they talked about it. They took notes, made notes.

([ARRB MD 63]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md63.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md63.pdf))  
[[text](<http://www.kenrahn.com/Marsh/Jfk-conspiracy/ROBINSON.TXT>)] [[audio]([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_Robinson.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_Robinson.htm))])

If Robinson's accusation is true, the pathologists never explained why they probed the base of the head. This may imply they weren't sure if the small head wound really connected to the large head wound. And if the brain had already been removed by the time Robinson described, a probe could not have been useful for tracing a path through the brain tissue. Could the edges of the defects in the skull have exhibited a discernable angle? Were the pathologists seeing if the small head wound connected to another defect on a different part of the skull?

When interviewed by the Assassination Records Review Board on 6/21/1996, Tom Robinson said that the probe which was inserted into the back of the head also emerged from the throat. The interview report reads:

>Tracheotomy: Robinson remembered the tracheotomy wound in the anterior throat. In his opinion that wound also represented an exit wound for a bullet.

>-Use of Probes: Robinson had vivid recollections of a very long, malleable probe being used during the autopsy. His most vivid recollection of the probe is seeing it inserted near the base of the brain in the back of the head (after removal of the brain), and seeing the tip of the probe come out of the tracheotomy incision in the anterior neck. He was adamant about this recollection. He also recalls seeing the wound high in the back probed unsuccessfully, meaning that the probe did not exit anywhere.

([ARRB MD 180]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md180.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md180.pdf)); [full audio unavailable, tape stored at the National Archives building in College Park, Maryland] (<https://www.archives.gov/research/jfk/review-board/series-04.html>))

The pictures taken in Dealey Plaza show President Kennedy reaching towards his neck moments before receiving the large wound on the side of the head ([Altgens 6] (<http://content.invisioncic.com/r16296/post-5199-074941900%201294964243.jpg>); [Zapruder Film] (<https://www.youtube.com/watch?v=iU83R7rpXQY>)). If the throat wound was an exit for a bullet which entered the head, it must have been a separate bullet from the one which caused the large head wound moments later.

Did Kennedy's body show any evidence for a bullet path between the head and the throat? Such a trajectory would not need to be straight, as a bullet is more likely to deflect if it hits a curved portion of the skull (\*Spitz and Fisher's *Medicolegal Investigation of Death*; \*Missile Wounds of the Head and Neck, Volume 1\*, edited by Bizhan Aarabi and Howard H. Kaufman). For such a bullet to reach the neck area, it would probably have to pass through the floor of the skull. None of the official photographs or x-rays give an unobstructed view of this area, but there are some statements indicating the floor may have been fractured. Tom Robinson said in his HSCA interview "*The inside of the skull was badly smashed*" ([ARRB MD 63] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md63.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md63.pdf)) [[text]

(<http://www.kenrahn.com/Marsh/Jfk-conspiracy/ROBINSON.TXT>) [\[\[audio\]\(https://history-matters.com/archive/jfk/hsca/med\\_testimony/audio/HSCA\\_Robinson.htm\)\]](https://history-matters.com/archive/jfk/hsca/med_testimony/audio/HSCA_Robinson.htm)), and the report on Robinson's interview by the ARRB reads *"\*He also said that there were fractures all over the cranium, including the floor of the skull, saying on another occasion, "every bone in his head was broken\*"* ([ARRB MD 180, p.3]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md180.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md180.pdf))). When Dr. Humes was asked in his 2/13/1996 ARRB deposition *"\*Were there any injuries or fractures in that portion of the skull?\*" (the bottom of the skull), he replied *"\*Well, yeah, I guess. Yes. Because the wound was below there, you see. You're looking at it from above, and the wound, the entrance wound you wouldn't see on a view from the top. But there were fractures in the [posterior cranial fossa](https://en.wikipedia.org/wiki/Posterior\_cranial\_fossa) radiating from the wound\*"* ([ARRB, 2/13/1996]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Humes\\_2-13-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Humes_2-13-96.pdf)) [\[\[text\]\(http://mcadams.posc.mu.edu/russ/testimony/humesa.htm\)\]](http://mcadams.posc.mu.edu/russ/testimony/humesa.htm))).*

The June 1967 issue of *\*Ramparts\** magazine included an [article by former FBI Agent William Turner](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/R%20Disk/Ramparts/Item%2009.pdf>) which read *"\*a nurse at Parkland Hospital said that when doctors attempted a tracheotomy on the President, the damage was so great the tube pushed out the back of his head\*"*. Pursuing the origin of this claim, researcher Pat Speer wrote: *"\*Obviously, if the quote attributed to the nurse was accurate, it would support that a bullet track connected the throat wound and the head wound. It might support it even if was only partially accurate.(Perhaps the nurse was inaccurately repeating Jenkins' observation about air bubbling up from the brain, or perhaps Turner was inaccurately reporting what this nurse was trying to convey.) When I contacted Turner in October 2007 to see if he could recall this interview, however, he responded "I remember sticking it in that article but I didn't interview the nurse. I suspect it was David Welch, a Ramparts writer, with whom I made a trip to Dallas on the JFK case. He interviewed a number of witnesses separate from me...I last had contact with David Welch at a Warren Hinckle party some 15 years ago. At the time he was working for a SF union---I can't remember which one." (I subsequently discovered, via John Kelin's book Praise From a Future Generation, that this Ramparts writer was named David Welsh, not Welch. If anyone knows the current whereabouts of David Welsh, and how I can reach him and clear up this matter, please let me know\*"* ([PatSpeer.com, *\*A New Perspective\** on the Kennedy Assassination\* by Pat Speer, Chapter 17: *\*Newer Views on the Same Scene\**, *\*Reading the Signs\**] (<http://www.patspeer.com/chapter17%3Anewerviewsonthesamescene>)).

When Parkland Hospital's Dr. Marion Jenkins testified to the Warren Commission on 3/25/1964, he said *"\*As the resuscitative maneuvers were begun, such as "chest cardiac massage," there was with each compression of the sternum, a gush of blood from the skull wound, which indicated there was massive vascular damage in the skull and the brain, as well as brain tissue damage\*..."* ([WC Vol. 6, p. 45]([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Jenkins.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Jenkins.pdf)) [\[\[text\]\(http://mcadams.posc.mu.edu/russ/testimony/jenkins.htm\)\]](http://mcadams.posc.mu.edu/russ/testimony/jenkins.htm)). Marion Jenkins' daughter, Christine Jenkins, said something similar when she spoke about her father's story in a 2008 presentation.

According to researcher Jack White, Christine said to the crowd "*Each time he squeezed on his air bag, bubbles of blood came out the brain wound*" ([PatSpeer.com, \*A New Perspective on the Kennedy Assassination\* by Pat Speer, Chapter17: \*Newer Views on the Same Scene\*, \*Reading the Signs\*](<http://www.patspeer.com/chapter17%3Anewerviewsonthesamescene>)).

Low-velocity bullets have been known to sometimes create very small exit wounds. When Parkland Hospital's Dr. Ronald Jones spoke about the throat wound in his 3/24/1964 Warren Commission testimony, he said "*The hole was very small and relatively clean cut, as you would see in a bullet that is entering rather than exiting from a patient. If this were an exit wound, you would think that it exited at a very low velocity to produce no more damage than this had done, and if this were a missile of high velocity, you would expect more of an explosive type of exit wound, with more tissue destruction than this appeared to have on superficial examination*". When asked "*Would it be consistent, then, with an exit wound, but of low velocity, as you put it?*", Jones replied "*Yes; of very low velocity to the point that you might think that this bullet barely made it through the soft tissues and just enough to drop out of the skin on the opposite side*" ([WC Vol. 6, p. 51] ([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Jones.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Jones.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/jones\\_r.htm](http://mcadams.posc.mu.edu/russ/testimony/jones_r.htm)))]).

### **\*\*Admiral Galloway\*\***

Vice/ Rear Admiral (Dr.) Calvin Galloway was the commanding officer of the Bethesda medical center. Galloway witnessed the autopsy ([WC D 7, p. 280](<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>); [HSCA Vol. 7, p. 8] ([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M2\\_Autopsy.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M2_Autopsy.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>))]).

On 3/11/1964, Galloway was interviewed by the Warren Commission's assistant council Arlen Specter, alongside the autopsy pathologists Dr. James Humes and Dr. J. Thornron Boswell. As Specter reported:

>All three described the bullet wound on President Kennedy's back as being a point of entrance. Admiral Holloway then illustrated the angle of the shot by placing one finger on my back and the second finger on the front part of my chest which indicated that the bullet traveled in a consistent downward path, on the assumption that it emerged in the opening on the President's throat which had been enlarged by the performance of the tracheotomy in Dallas.

(Specter, \*Interview of Autopsy Surgeons\* [[page 1]

([https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes\\_j\\_j\\_cdr/humes\\_j\\_j\\_cdr-0018.jpg](https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes_j_j_cdr/humes_j_j_cdr-0018.jpg)) [[page 2]



([https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes\\_j\\_j\\_cdr/humes\\_j\\_j\\_cdr-0019.jpg](https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes_j_j_cdr/humes_j_j_cdr-0019.jpg))]

The use of the phrase "assumption" implies there was a point when the pathologists thought there *could have been* a bullet passage at the tracheotomy site, without being *sure*. It sounds like this period came BEFORE Humes made contact with Parkland Hospital.

On 3/17/1978, Admiral Galloway was interviewed by the Forensic Pathology Panel of the House Select Committee on Assassinations. The report on this interview reads:

>Galloway could only recall one primary discussion among the pathologists. This focused on determining where the missile that entered the back could have exited. Galloway said this problem remained ambiguous until Dr. Humes called Parkland Hospital on Saturday morning and ascertained that a doctor had performed a tracheotomy directly through the missile track thus obliterating it. Galloway said the doctors actually suspected this during the autopsy, but couldn't prove it.

([HSCA 180-10079-0460](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/G%20Disk/Galloway%20Calvin%20B%20Admiral/Item%2001.pdf>) [[text] (<http://www.kenrahn.com/Marsh/Jfk-conspiracy/GALLOWAY.TXT>)])

Galloway's statements suggest a certain level of awareness on the night of the body examination. Just as Specter's report on the 3/11/1964 interview with Galloway mentioned an *"assumption"* that a bullet had *"emerged in the opening on the President's throat which had been enlarged by the performance of the tracheotomy in Dallas"*, the report on Galloway's HSCA interview likewise says *"the doctors actually suspected this during the autopsy, but couldn't prove it"*. If it is true that the pathologists "suspected" but "couldn't prove" a bullet passage in the throat, it would have been very neglectful to not try dissecting the wounds or preserving the organs of the neck.

### **\*\*James Jenkins\*\***

James Curtis Jenkins was the autopsy's laboratory technician ([WC D 7, p. 280] (<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>); [HSCA Vol. 7, p. 8]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M2\\_Autopsy.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M2_Autopsy.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]).

Jenkins provided the following information when interviewed by researcher David Lifton on 9/23/1979, as summarized in Lifton's 1980 book *Best Evidence: Disguise and Deception in the Assassination of John F. Kennedy*:

[Part VI – *1979: The Coffin/Body Problem*, Chapter 27. *The Recollections of James Curtis Jenkins, et al.*, *Interviewing Jenkins*]

>Jenkins had vivid recollections about the controversy concerning the neck trajectory. The wound at the front of the throat, throughout the autopsy, he said, was assumed to be a tracheotomy. Yet, said Jenkins, the civilians who seemed to be in charge seemed to be trying to get Humes to conclude that a bullet passed from back to front through the body.

[...]

>James Jenkins told me that during the autopsy, when the "civilians" were practically arguing with Humes, they put the idea to him that the bullet entered at the rear, exiting through the tracheotomy incision , and that that bullet went on to hit Connally.\*\*^62

[...]

[Part VII – *Synthesis*, Chapter 30. *The X-rays and Photographs Reconsidered*, *The Puzzle of the Ruler*]

>[...] Unfortunately, Jenkins never made a written record, and so it is easy to discount his recollections by claiming he was influenced by what he later read in books and magazines. But having spoken with him, I didn't believe that was the case. Jenkins did not follow the case and, in fact, until I spoke with him in September 1979, did not know a bullet wound at the front of the neck had been observed in Dallas. Jenkins kept referring to it as the "tracheotomy incision," and couldn't understand why those "civilians" in the autopsy room kept claiming that a bullet exited there.

On 4/6/1991, Jenkins participated in a panel discussion:

Harrison Livingstone: Do you think something was being covered up in that autopsy, in the autopsy itself?

Jenkins: I'm not sure that anything was being covered, I think that certainly things were being controlled, because reflecting back to some of the relationship between the people in the gallery and the people on the floor- getting back to the back wound, when they could not probe the back wound to the front of the body, there were some animosities that came out of the gallery as primarily indicating 'you don't really know what you're doing'.

Livingstone: You mean somebody wanted that wound to come out somewhere in the front?

Jenkins: Yes. My impression was that somebody wanted the wound in the back to come out the front. Now, if you remember back, we did not know that that was a bullet wound. We thought, and I think all of the doctors there have said the same thing, we assumed that that was a trach [...]

[...]

Jenkins: [...] To be honest, at that point in time, I don't think anyone in the morgue really reflected back on this wound as being anything but a trach, and it was not until later on that I became aware that supposedly there was an entrance wound there as far as the Parkland doctors had seen.

([Video](<https://www.youtube.com/watch?v=QpmMa10KNHo>), 58:18)

## **\*\*Subsequent statements of Humes and Boswell\*\***

Lead autopsy pathologist Dr. James Humes testified to the Warren Commission on 3/16/1964, while in the presence of his two assistants Dr. J. Thornton Boswell and Dr. Pierre Finck. Boswell's "testimony" is only one page long and consists of the Commission's assistant council Arlen Specter asking him if he agreed with everything Humes had just said ([WC Vol. 2, p. 376]

(<https://www.maryferrell.org/showDoc.html?docId=38#relPageId=384&tab=page>) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/boswell.htm>)]). When Specter interviewed Humes, Boswell, and Admiral Galloway on 3/11/1964, the meeting was only summarized in a short memo (Specter, *\*Interview of Autopsy Surgeons\** [[page 1] ([https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes\\_j\\_j\\_cdr/humes\\_j\\_j\\_cdr-0018.jpg](https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes_j_j_cdr/humes_j_j_cdr-0018.jpg))] [[page 2] ([https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes\\_j\\_j\\_cdr/humes\\_j\\_j\\_cdr-0019.jpg](https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes_j_j_cdr/humes_j_j_cdr-0019.jpg))]).

On 11/25/1966, an exclusive interview with Dr. Boswell appeared in the Baltimore Sun. Boswell stated that there was "***absolutely no doubt that the controversial neck and throat wound were caused by a bullet that entered the base of President Kennedy's neck, passed completely through the neck and exited from the throat***". But his judgement comes into question when the article goes on to say "***Dr. Boswell said the autopsy was routine in every respect, and that it included every activity which would accompany a medical-legal autopsy***". Dr. Finck, on the other hand, openly acknowledged that their performance was inadequate ([Shaw trial testimony, 2/24-25/1969]

(<http://www.aarclibrary.org/publib/jfk/garr/trial/pdf/Feb24.pdf>) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/finckshaw.htm>)]). As judged by the Forensic Pathology Panel of the House Select Committee on Assassinations, the body examination did not meet any credible standard for a complete forensic autopsy ([HSCA Vol. 7, p. 181, 3/29/1979, Part IV. *\*Critique of the earlier examination, with presentation of suggested procedures to be followed in performing an investigation and examination on the remains of a gunshot victim\**] ([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M54\\_Critique.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M54_Critique.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7c.htm#crit>)]).

Boswell described a period of time when the doctors realized for themselves there was a bullet passage at the tracheotomy site, before Humes was told so over the phone by Parkland Hospital's Dr. Malcolm Perry. Boswell claimed that this realization happened when they saw internal bruising upon opening the chest. He also said that Sibert and O'Neill were wrong in their reports relaying the theory of a shallow back wound without an exit. In Boswell's words, the later phone call between Humes and Perry just confirmed what they already knew.

The Baltimore Sun article reads:

>He said the general physical condition of the President as well as the wounds, was noted in detail with microscopic slides and tissue specimens collected for further examination.

>Among the slides, he said, were those of tissue at the neck wound which indicated, by the presence of foreign substances such as fiber particles, that the wound was one of entrance.

>There was no mention in the autopsy reports of these slides of the wound, and Dr. Boswell could not explain why.

(Nobody else from the autopsy mentioned cloth fibers being identified on the skin)

>Dr. Boswell said that the President's body was subjected to a thorough examination. All marks and scars, were noted, including old surgical scars and surgical cuts made that day by Dallas doctors trying to save his life.

>The pathologists had already been told of the probable extent of the injuries and what had been done by physicians in Dallas.

[...]

>**\*\*Wound Not Evident\*\***

>The wound in the throat was not immediately evident at the autopsy, Dr. Boswell said, because of the tracheotomy performed in Dallas.

>He said the wound in the back of the neck was noticed when the body was turned over. It was a new discovery.

>According to the Warren Commission testimony, Dallas physicians did not make a thorough examination of the President at first because of the evident seriousness of the massive head wound and the necessity of immediate emergency procedures.

>They believed the throat wound was an entrance wound and never did turn the body over to look for back wounds, even after the President died.

>Dr. Boswell said that the tracheotomy incision was examined and extensive trauma was noted on one side.

>When the wound in the back of the neck was discovered and probed, by finger and by metal surgical probe, no bullet could be located.

>He said that the probing was to a depth of about 4 or 5 centimeters.

>**\*\*Complete X-Rays\*\***

>At this point, according to Dr. Boswell, complete x-rays of the entire body were ordered in an effort to locate the bullet.

>Dr. Boswell recalled that either he or one of the other pathologists made a remark to the effect that the bullet might have worked its way back out of the entrance wound.

>"This was a very transient thought," he said, adding that he had never seen a case in which this had happened and therefore did not give this possibility much weight.

>What was more probable, he said, was the possibility of the bullet's being in some remote area of the body.

>He said that medical literature recounts many examples of wildly erratic paths taken by bullets that ricochet through the body, glancing from bones and slipping along muscle planes.

>As an example, he mentioned a case he examined where a bullet that entered the victim's chest was located in a lower leg.

>The doctor said that retrieval of bullets, as well as the determination of their paths, is extremely important in all forensic autopsies because of the legal necessity of linking wounds, bullets, weapons and assailants.

>Dr. Boswell said the x-rays were immediately examined by all three pathologists as well as by the radiologist who took them.

>He said the presence of bullets in an x-ray is unmistakable because of the capacity of metal to block the rays.

>He said there was no bullet in the body, although "minute particles" could be discerned the head.

>Dr. Boswell said he is "absolutely" convinced that all of these particles came from the bullet that struck the President's head.

### >**\*\*Bullet In Stretcher\*\***

>Around this time, according to the FBI report, the FBI observers informed Dr. Humes that a bullet had been recovered from a stretcher in the Dallas hospital.

>Dr. Boswell said that the autopsy was resumed after the examination of the x-rays, the pathologists assuming that, unlikely as it seemed, the bullet had exited from the same hole it entered.

>He said that the autopsy proceeded routinely. According to the autopsy report, and confirmed by Dr. Boswell, the internal examination revealed a bruise in the apex, or uppermost tip, of the right lung.

>There was also a bruise of the parietal, pleura, the membrane that lines the lung cage.

>Dr. Boswell said he and his colleagues decided that the bullet had not made a superficial wound after all, but had passed above the area of the bruise.

>He said that neither the parietal pleura nor the lung cage were disrupted, indicating that the lung cage had not been pierced.

>"We concluded that night that the bullet had, in fact, entered in the back of the neck, traversed the neck and exited anteriorly," Dr. Boswell said.

>He said that a telephone call made to the hospital in Dallas by Dr. Humes the following morning merely confirmed what was already a certainty to the pathologists - that there was a bullet wound in the President's neck at the point of the tracheotomy incision.

>Dr. Boswell said it was impossible to determine during autopsy if the throat wound was one of entry or exit because of the incision.

>**\*\*Determination Unnecessary\*\***

>This determination was unnecessary, he said, since the wound in the back of the neck was determined by observation and microscopic examination one of entry, and because the path of the bullet was determined by the bruise marks in marks in the lung area.

[...]

>The FBI account of the autopsy is dated November 26, four days after the examination.

>It refers to a back wound, but this, according to Dr. Boswell, can be a laymen's observation of an area just below the shoulder line that, to a physician, is still the neck region.

>More disturbingly, it recounts the incident during which the exit wound was undiscovered and leaves, unchanged, a statement in which Dr. Humes concluded the bullet had worked itself cut of the same hole it had entered.

>**\*\*Story Left Unchanged\*\***

>Dr. Boswell said that, at the time, he paid no attention to the presence of the FBI agents but that he can only conclude that they either did not understand what later took place, or else left before the lung contusions were discovered.

([Baltimore Sun, 11/25/1966, \*Pathologist Who Made Examination Defends Commission's Version; Says Pictures And Details Back Up Warren Report\*](<https://archive.org/stream/nsia-AutopsyJFKBoswellJThorton/nsia-AutopsyJFKBoswellJThorton/Autopsy%20JFK%20JTB%2008#page/n0/mode/2up>) by Richard H. Levine [[2nd print] (<https://www.maryferrell.org/showDoc.html?docId=62495#relPageId=17&tab=page>)])

On 1/11/1967, Boswell talked to researcher Josiah Thompson. Thompson wrote: "*I asked Commander Humes's assistant, Commander J. Thornton Boswell, about Humes's inserting his finger in the President's back wound and feeling its end. Boswell told me that this was correct and that, in fact, all three doctors had probed this wound with their fingers up to the first or second knuckle—a penetration of 1 to 2 inches.*<sup>7</sup> Boswell also indicated that the back wound had been examined with a metal probe—a thin piece of stiff wire some eight inches long with a knob on the end\*" ([\*Six Seconds in Dallas\* by Josiah Thompson, III. \*The First Shot\*, \*The Back Wound\*] ([http://www.krusch.com/books/kennedy/Six\\_Seconds\\_In\\_Dallas.pdf](http://www.krusch.com/books/kennedy/Six_Seconds_In_Dallas.pdf))).

On 8/17/1977, Boswell was interviewed by the House Select Committee on Assassinations. As reported:

>DR. BOSWELL indicated that regarding the tracheostomy, the doctors "...thought it was a wound." He meant to convey the impression that the doctors thought it was a bullet wound. (This becomes potentially significant in later stages of the interview.)

[...]

>DR BOSWELL indicated that "...we had gotten ourselves in dutch with the neck and throat wounds with regard to the Secret Service." DR. BOSWELL indicated that one of the agents (he wasn't sure if FBI or Secret Service) was on the phone most of the time. (He seemed to be implying they were on the phone that was in the main autopsy room.)

[...]

>Dr. Boswell said the autopsy doctors assumed that the anterior neck wound was a wound of exit, saying that hole is not that big and that it was "...far bigger that wound of entry." He said the doctors didn't explicitly discuss the possibility of a tracheotomy having been performed but said it was assumed that this was a possibility. He said Parkland did not really do a tracheotomy in the sense that they never inserted a tube. (See notes on interview with Dr. Perry.) Dr. Boswell said that if a full autopsy had been performed they would have removed the trachea. Dr. Boswell said he remembered seeing part of the perimeter of a bullet wound in the anterior neck.

Boswell then seemed to change his story in mid-interview:

>Dr. BOSWELL was asked why the back wound was probed if the autopsy doctors knew the bullet had exited out the anterior neck (as Dr. BOSWELL stated earlier in the interview). Dr. BOSWELL said that Dr. BURKLEY didn't mention the fact that a tracheotomy had been performed. He said that Dr. BURKLEY was very upset and this might have explained his failure to mention this important fact. Dr. BOSWELL said (without indicating that he was being inconsistent with his previous statement), the doctors felt anterior neck damage was caused by a tracheotomy wound and in the later courses of the autopsy thought it may have included the exist wound of a bullet. He said the x-rays were examined during the autopsy in trying to accomplish what they saw as their main purpose, namely to look for a bullet. Dr. BOSWELL is a little vague as to when the doctors felt that a bullet may have fallen out the neck wound, but seemed to indicate it occurred around the time they learned the bullet had been discovered in Parkland and prior to the time when they began to feel there was a very real possibility of an exit wound in the anterior neck.

([ARRB MD 26, \*Boswell-Purdy HSCA Interview (8/17/77)\*]

([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md26.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md26.pdf)) [[text]

(<http://www.kenrahn.com/Marsh/HSCA/BOSWELL.TXT>)]])

In this report, neither version of Boswell's story match the explanation given by Dr. Finck. If Boswell tried to say that "*\*he remembered seeing part of the perimeter of a bullet wound in the anterior neck\**", then why wasn't this mentioned by anybody else from the autopsy? Finck specified the opposite, that he examined the trach incision and didn't notice any sign of a gunshot: "*\*I examined the tracheotomy skin wound and the trachea and did not find evidence of a bullet wound\**", "*\*The tracheotomy wound was*

*examined by the three prosecutors. None of us noticed a bullet wound along its course\**" ([ARRB MD 28, *\*Reports From LtCol Finck to Gen. Blumberg (1/25/65 and 2/1/65)\**]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md28.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md28.pdf))); *"\*I examined this wound made by a surgeon, it is very commonly found in unconscious patients, the incision is made to allow them to breathe. I did not see a wound of exit at that time\*..."*, *"\*I examined the surgical incision, but I don't recall seeing the small wound described by the Dallas surgeons. It was part of the surgical incision and I didn't see it\*"* ([Shaw trial testimony, 2/24-25/1969] (<http://www.aarclibrary.org/publib/jfk/garr/trial/pdf/Feb24.pdf>) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/finckshaw.htm>))]).

On 9/16/1977, the HSCA interviewed Humes and Boswell together. Over thirteen years after the event, Humes finally gave his version of a solid timeline for his phone call with Dr. Perry. He stated that after the body was prepared for burial, he left Bethesda Hospital, went home, went to a religious function with his family, then returned back to the hospital – perhaps meeting with Boswell - and only then did he call Perry, at "*...\*11 in the morning, perhaps 10:30, something like that\*..."*.

>Dr. BADEN. [...] in further discussing the exit perforation through the tracheotomy, did you have occasion to explore in the neck area beyond what is in the protocol, beyond what the description was? As to what was injured?

>Dr. HUMES. Well, the trachea, I think we described the irregular or jagged wound of the trachea, and then we described a contusion in the apex of the lung and the inferior surface of the dome of the right pleural cavity, and that's one photograph that we were distressed not to find when we first went through and catalogued these photographs, because I distinctly recall going to great lengths to try and get the interior upper portion of the right thorax illuminated-you know the technical difficulties with that, getting the camera positioned and so forth, and what happened to that film, I don't know. There were a couple films that apparently had been exposed to light or whatever and then developed, but we never saw that photograph.

>Dr. BADEN. From the time you first examined them, that particular photograph was never seen?

>Dr. HUMES. Never available to us, but we thought it coincided very neatly with the path that ultimately we felt that that missile took.

[...]

>Dr. HUMES. Having completed the examination and remaining to assist the morticians in the preparation of the body, we did not leave the autopsy room until 5:30 or 6 in the morning. It was clearly obvious that a committee could not write the report. I had another commitment for that morning, a little later, a religious commitment with one of my children. And so I went home and took care of that, slept for several hours until about 6 in the evening of the day after, and then sat down and wrote the report that's sitting before you now myself, my own version of it, without any input other than the discussions that we thought that we had had, Dr. Boswell, Dr. Finck and myself. I thus returned that morning and looked at what I had written--now wait, I'm a day ahead of myself---Saturday morning we discussed--



>Dr. BOSWELL. Saturday morning we got together and we called Dallas.

>Dr. HUMES. We called Dallas. See, we were at a loss because we hadn't appreciated the exit wound in the neck, we had been-- I have to go back a little bit. I think for your edification. There were four times as many people in the room most of the time as there are in this room at this moment, including the physician to the President, the Surgeon General of the Navy, the Commanding Officer of the Naval Medical Center, the Commanding Officer of the Naval Medical School, the Army, Navy, and Air Force aides to the President of the United States at one time or another, the Secret Service, the FBI and countless nondescript people who were unknown to me. Mistake No. 1. So, there was considerable confusion. So we went home. I took care of this obligation that I had. To refresh my mind, we met together around noon on Saturday, 11 in the morning, perhaps 10:30, something like that and--

>Dr. BADEN. Now this is the day after?

>Dr. HUMES. The day after, within 6 or 8 hours of having completed the examination, assisting Waller's and so forth for the preparation of the President's remains. We got together and discussed our problem. We said we've got to talk to the people in Dallas. We should have talked to them the night before, but there was no way we could get out of the room. You'd have to understand that situation, that hysterical situation that existed. How we kept our wits about us as well as we did is amazing to me. I don't know how we managed as poorly or as well as we did under the circumstances. So I called Dr. Perry. Took me a little while to reach him. We had a very nice conversation on the phone in which he described a missile wound, what he interpreted as a missile wound, in the midline of the neck through which he had created a very quick emergency, as you can see from the photographs, tracheotomy incision effect destroying its value to us and obscuring it very gorgeously for us. Well, of course, the minute he said that to me, lights went on, and we said ah, we have some place for our missile to have gone. And then, of course, I asked him, much to my amazement, had he or any other physician in attendance upon the President. examined the back of the patient, his neck, or his shoulder. They said no, the patient had never been moved from his back while they were administering to him. So, the confusion that existed from some of his comments and the comments of other standby people in the emergency room in Dallas had been in the news media and elsewhere, so that added to the confusion. So, following that, and that discussion, and we having a meeting of minds as to generally what was necessary to be accomplished, and being informed by the various people in authority that our gross report should be delivered to the White House physician no later than Sunday evening, the next day, 24 hours later, or not quite 24 hours later. Not having slept for about 48 hours, I went home and rested from noon until 8 or 10 that evening, Saturday evening, and then I sat down in front of other notes on which I had made minor comments, handwritten notes.

>I wrote the report which is present here. [...]

[...]

>Dr. BADEN. Now, for example, not exploring the wound from the back to the neck, that was not done. I mean, cutting it open completely, that wasn't done specifically. Was that because somebody said don't do it?

>Dr. HUMES. Now wait a minute, that wound was excised.

>Dr. BADEN. The back wound?

>Dr. HUMES. Yes, sir. The back of the neck, and there are microscopic slides of that wound.

>Dr. BADEN. I see. The skin was taken out. And then was

>Dr. HUMES. It was probed.

>Dr. BADEN. Was it opened up?

>Dr. HUMES. It was not laid open.

>Dr. BADEN. Now, that was your decision as opposed to somebody else's decision?

>Dr. HUMES. Yes, it was mine.

>Dr. BADEN. With everything else going on at the time?

>Dr. HUMES. Yes. Our collective decisions, I suppose.

>Dr. BOSWELL. We had exhibited the midportion of the track and the chest by that time, and demonstrated the contusion on the apex of the lung and subpleurally, and we had at that point two points of the wound and then subsequently the wound of exit.

>Dr. Humes. Pretty good course.

>Dr. BADEN. The track definitely did not go through the pulmonary tissue?

>Dr. HUMES. Negative.

>Dr. BOSWELL. No.

>Dr. HUMES. There was a contusion of the dome of the right side of the thorax and a contusion, as Dr. Boswell said, a retropleural contusion, and it was a contusion of the upper lobe of the lung.

[[HSCA Vol. 7, p. 243]]([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59Ia\\_HumesBosw.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M59Ia_HumesBosw.pdf)) [[text]](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7f.htm>)]  
[[audio]]([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_HumesBoswell.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_HumesBoswell.htm)))

From Humes' 9/7/1978 testimony to the HSCA:

>Mr. CORNWELL. About what time of the night was the autopsy finally concluded?

>Dr. HUMES. Oh, I would estimate around midnight.

[...]

>Mr. CORNWELL. After it was over, what did you do next?

>Dr. HUMES. We stayed to assist the morticians and their associates to prepare the President's body.

>Mr. CORNWELL. How many hours did that take?

>Dr. HUMES. Until about 5 o'clock in the morning.

>Mr. CORNWELL. Then, what did you do?

>Dr. HUMES. After the President's body was removed, half an hour or so later, I went home.

>Mr. CORNWELL. Did you get any sleep?

>Dr. HUMES. Not too much. I had to take one of my children to a religious function that morning, but then I returned and made some phone calls and got hold of the people in Dallas, which was unavailable to us during the course of the examination, as you heard from Dr. Baden, and I couldn't agree more with the apparent findings of his panel as to problems that we had had and hoped they would never be repeated, and spoke with Dr. Perry and learned of the wound in the front of the neck and things became a lot more obvious to us as to what had occurred.

>Mr. CORNWELL. And you finally began to write the autopsy report at what time?

>Dr. HUMES. It was decided that three people couldn't write the report simultaneously, so I assumed the responsibility for writing the report, which I began about 11 o'clock in the evening of Saturday, November 23, having wrestled with it for 4 or 5, 6 hours in the afternoon, and worked on it until 3 or 4 o'clock in the morning of Sunday, the 24th.

[...]

>Chairman Stokes. Dr. Humes, under the rules of our committee, any witness may have 5 minutes in which to explain or in any way expand upon his testimony before our committee. I extend to you at this time such time as you so desire.

>Dr. HUMES. Thank you very much, Mr. Chairman. I certainly don't choose to avail myself of 5 minutes. Having heard most of what Dr. Baden said, and the findings of his committee on forensic pathologists, I think the committee was very well advised to gather such a distinguished group. I wish I had had the availability of that many people and that much time to reach the conclusions that I and my associates were forced to reach in approximately 36 hours. I hope that the committee, in its wisdom, will make recommendations to appropriate authorities to preclude such a difficulty in the future. I would say that our testimony--and my associates and I are quite elated, in fact, that the findings, to the best of my knowledge, the substantive findings of all the various panels that have examined these materials in such great detail, are in basic accordance with what we originally ascertained to be the situation. We are pleased by that. Our testimony before the Warren Commission, is quite lengthy, as I am sure some of the committee members are aware. However, I feel it also was hampered by our inability, No. 1 to never have seen, after about midnight of that night, the X-rays, to never have seen at any time until a year or two after the Warren Commission the photographs which we made. I think had we had those opportunities, some of the confusion and difficulties which seem to have arisen might not have arisen. I will be pleased to answer any other questions from you, sir, or any other members of the committee.

([HSCA Vol. 1, p. 323]([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol1/pdf/HSCA\\_Vol1\\_0907\\_7\\_Humes.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol1/pdf/HSCA_Vol1_0907_7_Humes.pdf)) [[text]([http://mcadams.posc.mu.edu/russ/m\\_j\\_russ/hscahume.htm](http://mcadams.posc.mu.edu/russ/m_j_russ/hscahume.htm))])

On 10/2/1990, Boswell was interviewed by Baltimore Police Officer Richard Waybright. As summarized in the book *\*High Treason 2\** by Harrison Livingstone, "...*\*Waybright also pointed out that Boswell indicated that they were not permitted to track the wounds, but that they probed the back wound briefly and it led toward the throat. He admitted that they were unaware of the throat bullet wound until the next day when Humes spoke to Dr. Malcolm Perry in Dallas on the telephone\**" (Livingstone, *\*High Treason 2\**, 1992, Chapter 8 [[draft](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/L%20Disk/Livingstone%20Harrison%20Edward/Item%20069.pdf>)])

Humes and Boswell were interviewed for a 5/27/1992 article in the Journal of the American Medical Association. Here, the phone call to Dr. Perry was estimated to happen at 7:30 AM.

>[...] Unfortunately, at the time of the autopsy, the tracheostomy performed on the President at Dallas in an attempt to save his live obliterated the exit wound through the front of his neck near the Adam's apple. Soft-tissue wounds are much more iffy than bone wounds, but there is no doubt from whence come to those bullets - from rear to front from a high-velocity rifle."

[...]

>\*\*\***Time to quit speculating**\*\*\*

>"The tracheostomy was a gaping wound, about 3 to 4 centimeters around, and we didn't think of it as an exit wound. We also noticed that the Dallas doctors had tried to place chest tubes in the front of the President's chest, but the tubes had not gone in and we found no in crease of blood or fluid in the pleural cavity. There was a contusion of the extreme apical portion of the right upper lobe of the lung, but no laceration. We also noted damage to the neck muscles, trachea, and pleura, but there was no bullet. It was bothering me very greatly, like nothing you can imagine, that we could find neither the second bullet nor its exit track. 'J' and I both knew that bullets can do funny things in the body, and we thought it might have been deflected down to the extremities. We x-rayed the entire body, but did not find a bullet." The autopsy was also criticized because the pathologists did not dissect the President's neck to track the second bullet. Humes says bluntly, "Dissecting the neck was totally unnecessary and would have been criminal."

>"By midnight, we decided it was time to quit speculating about the second bullet, and I am very comfortable with this decision. It is true that we were influenced by the fact that we knew Jackie Kennedy was waiting upstairs to accompany the body to the White House and that Admiral Burkley wanted us to hurry as much as possible. By midnight, our task was done - it was perfectly obvious what had killed the man. The second bullet was important, but not of overriding importance. We knew we would find the explanation sooner or later."

>The explanation came sooner, the next morning at 7:30 when Humes Dallas to talk to Dr. Malcolm Perry, the surgeon who had performed the tracheostomy. "The light came on when I talked to Dr. Perry," Humes says. "Of course, the bullet had exited through the neck." [...]

([JAMA, 5/27/1992, *\*JFK's death - the plain truth from the MDs who did the autopsy\**] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md22.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md22.pdf)) [[text](<http://the-puzzle-palace.com/jama.htm>)])

Even though Humes said "*\*Dissecting the neck was totally unnecessary and would have been criminal\**", his assistant, forensic pathologist Dr. Finck, admitted that their examination would not be considered a "complete" autopsy by the standards of the American Board Of Pathology, for the very reason that the wounds were *\*not\** dissected ([Shaw trial testimony, 2/24-2/25/1969] (<http://www.aarclibrary.org/publib/jfk/garr/trial/pdf/Feb24.pdf>) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/finckshaw.htm>)]; [Resident and Staff Physician, 5/1972, *\*Observations based on a review of the autopsy photographs, x-rays, and related materials of the late President John F. Kennedy\** by John K. Lattimer] (<https://pdfs.semanticscholar.org/1fa2/bee3d41bc4815f0874d9dd74598ad4fcb55e.pdf>)).

On 3/30/1994, Boswell was interviewed by researcher Gary Aguilar:

>JB: [...] "Well, what happened was that -- eh -- and this has caused -- and in fact -- the Secret Service and FBI people were never taken out -- were never out of the, eh, morgue. They stayed there the entire time and the telephone was right by my shoulder and those guys stayed on the telephone all the time. And they were causing an awful lot of distraction. But anyway, eh, what happened was that -- eh -- we probed that wound and considered opening it actually to -- eh -- eh, demonstrate the entire length of it and so forth. And then, when we got into the chest and into the neck, we found the entire tract, it was external to the pleura. It did not go into the -- the chest cavity. But it was right at the apex of the chest cavity, and right along it, and it went from superior to inferior, back to front. And, eh, by the time that we had demonstrated, eh, at the end of the autopsy, eh, we felt it was not necessary to open the tract up, or to probe further or that sort of thing. We were perfectly well satisfied about the course of that wound."

>GA: Did Humes speak to anybody in Dallas on the phone that night?

>JB: "Not that night -- early the next morning."

([Transcript](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/A%20Disk/Autopsy%20JFK%20Notes%20Press%20Clippings/Item%20033.pdf>) [[audio, partial] (<http://www.assassinationweb.com/audio1.htm>)])

On 2/13/1996, Dr. Humes gave his deposition to the Assassination Records Review Board. This time he said he remembered calling Perry "*\*I think 8 or 9 o'clock on Saturday morning\**".

>Q. During the course of the autopsy--

>A. Let me interrupt there. May I?

>Q. Sure.

>A. My problem is, very simply stated, we had an entrance wound high in the posterior back above the scapula. We didn't know where the exit wound was at that point. I'd be the first one to admit it. We knew in general in the past that we should have been more prescient than we were, I must confess, because when we removed the breast plate and examined the thoracic cavity, we saw a contusion on the upper lobe of the lung. There was no defect in the pleura anyplace. So it's obvious that the missile had gone over that top of the lung.

>Of course, the more I thought about it, the more I realized it had to go out from the neck. It was the only place it could go, after it was not found anywhere in the X-rays. So early the next morning, I called Parkland Hospital and talked with Malcolm Perry, I guess it was. And he said, Oh, yeah, there was a wound right in the middle of the neck by the tie, and we used that for the tracheotomy. Well, they obliterated, literally obliterated--when we went back to the photographs, we thought we might have seen some indication of the edge of that wound in the gaping skin where the--but it wouldn't make a great deal of sense to go slashing open the neck. What would we learn? Nothing, you know. So I didn't--I don't know if anybody said don't do this or don't do that. I wouldn't have done it no matter what anybody said. That was not important. I mean, that's--

>Q. Do you know what the standard autopsy protocol is for gunshot wounds and autopsy of the neck?

>A. Well, no. I haven't seen that in--what you say, standard, I mean, many times if you have a track of a missile, it's helpful to take a long probe and put it in the position. It can tell you a lot of things. If you know where the point of entrance and the point of exit are, it's duck soup. But for me to start probing around in this man's neck, all I would make was false passages. There wouldn't be any track that I could put a probe through or anything of that nature. It just doesn't work that way.

>Q. Was any probe used at all to track the path--

>A. I don't recall that there was. There might have been some abortive efforts superficially in the back of the neck, but no.

>And if there's a standard protocol, I don't know where you'd find it, to tell you the truth.

[...]

>Q. When is the first time you had a conversation with anyone outside of people in the autopsy room regarding the nature of the President's wounds?

>A. The next morning when I called Malcolm Perry.

>Q. Approximately--

>A. I'm pretty sure that's who I spoke to. I know it is.

>Q. Approximately what time did you speak to Dr. Perry?

>A. I think 8 or 9 o'clock on Saturday morning.

>Q. Were you aware of any telephone calls being made from the autopsy room during the time of the autopsy?

>A. Well, you see, that's possible. Certainly not by me, but we had a large defect in the side of--in the right side of the President's skull, and there was dialogue back and forth between somebody--I don't know whether the FBI or Secret Service-- that fragments of bone had been picked up on the street. And there was conversation back and forth between--I guess they were Secret Service people. I had no idea, to tell you the truth. And they were going to be sent to us, which was fine because we needed to close the defect if we could. It didn't turn out to be enough to totally close the defect. We did other things to accomplish that. But your specific question, if these phone conversations were going on, I was not directing them, I was not involved in them, and really it wasn't my problem.

>Q. Was there a telephone in the autopsy room?

>A. Yes.

>Q. Do you recall whether anyone was stationed at the telephone during the course--

>A. No, no. If there was, I didn't have anything to do with it.

>Q. Did you make any attempts to call anyone in Dallas prior to the completion of the autopsy?

>A. No.

>Q. Were you aware of any other kinds of communications, in addition to telephone calls, between Bethesda Hospital and Dallas regarding wounds of the body?

>A. No.

>Q. In addition to the call that you had with Dr. Perry, did you speak with any other person who had been in Dallas on the day of the assassination regarding the nature of the President's wounds?

>A. Contemporaneously at that time?

>Q. Thank you. Let me try the question again. Prior to the time that you had completed the autopsy protocol, did you speak with any other doctor--

>A. No.

>Q. --or law enforcement official about the nature of the wounds on President Kennedy's body?

>A. I did not.

>Q. Dr. Perry is the only one, then, prior to the completion--

>A. Right.

>Q. --of the autopsy protocol?

>A. Yes.

[...]

>Q. Did you consider the autopsy to be a medical-legal autopsy?

>A. Yes. Oh, sure.

>Q. And there was a gunshot wound to the neck, wasn't there?

>A. Well, you'd better clarify that. There was a big gaping tracheotomy wound in the anterior neck. I learned later that there had been a gunshot wound in that location, but I didn't know it. That was 99 percent of my problem. There was a bullet wound in the back above the scapula, like I mentioned earlier, and there was a wound of entrance in the back of the skull and a wound of exit in the skull. Those were the wounds.

[...]

>A. Well, we looked at this wound in the upper part of his neck, and we made a customary Y-shaped incision to do the rest of the autopsy and removed the breast plate, which was standard operating procedure, and examined the inside of the thorax. And that's when we saw the contusion of the dome of the upper lobe of the right lung, and we wondered, Where's the bullet? You know. Should have called Dallas right then and there. It would have saved me a lot of worry and grief for several hours, because X-rays hadn't found it for us. Like it could have been in his thigh or it could have been in his buttock. It could have been any damn place. We don't know where it went. It was obvious after we talked to the doctors the next morning where it went. It went out. That's why we couldn't find it. And we weren't going to spend the rest of the night there, you know.

>Meantime, George Burkley is telling me, you know, the family wants to get out of here sometime tonight. Then we proceeded with the dissection of the lungs, heart, and abdominal contents and so forth.

[...]

>Q. During the time that you were performing the autopsy, did you ever identify what you took to be the margin of a wound in the area of the trach incision?

>A. No.

([ARRB, 2/13/1996]([https://www.history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Humes\\_2-13-96.pdf](https://www.history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Humes_2-13-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/humesa.htm>)])



In the entire history of Humes' statements, he never gave a definitive answer for whether a bullet passage in the throat was considered before his call with Dr. Perry.

Dr. Boswell gave his deposition to the ARRB on 2/26/1996.

>Q. Wouldn't it be standard practice in a forensic autopsy to have the clothing available for inspection during the autopsy?

>A. Well, under normal circumstances, but these were not normal circumstances. I mean, the body was transferred from Dallas and everything, and we certainly understood that that was not feasible. But then Jim made the decision early in the evening that we had to talk with the doctors who had done the examination in Dallas and did subsequently in the morning talk with them and discuss the wounds and clothing and so forth.

>Q. When was the first conversation with doctors in Dallas, as best you recall?

>A. Saturday morning.

>Q. Do you know of any reason that they were not contacted on Friday night during the autopsy?

>A. I guess just the fact that we were pretty well tied up all night. It would have been--it was midnight after--when we finished, and Jim wrote up the autopsy. I followed him home, and then he took all of our notes to his house, and then he wrote up the autopsy before he went to bed. The three of us separated, and I don't think we discussed calling Dallas at that hour of the night.

[...]

>Q. Prior to the time you first saw President Kennedy's body, had you heard any communications about the nature of the wounds that he had suffered?

>A. I don't think specifically. I think just the fact that he had a head wound.

>Q. The doctors in Dallas who had treated President Kennedy had a news conference on the afternoon of November 22nd that would have been at approximately 4:15 to 4:30 Washington time. Had you heard any communications about what those doctors had said during the press conference?

>A. No.

>Q. Do you know whether Dr. Humes had received any information prior to the beginning of the autopsy about the nature of the wounds on President Kennedy?

>A. I'm almost sure that he didn't.

>Q. Have you ever heard him say that he had any information prior to the beginning of the autopsy?

>A. No.

[...]

>Q. Did you or Dr. Humes ever use the telephone in the autopsy room during the course of the autopsy?

>A. I didn't, and I--well, now, wait a minute.

>I may have called Pierre or called the AFIP before or in the early part of the autopsy. That's the only time I might have used it. I'm not sure about that. And Jim, I don't think he used it either.

>Q. Do you remember Dr. Finck using the telephone?

>A. I don't believe so. It was pretty busy all evening.

>Q. The telephone?

>A. Yes.

>Q. Who was using the telephone?

>A. Security people mostly.

>Q. And could you overhear their conversations?

>A. A lot of it, yes.

>Q. And do you know with whom they were speaking?

>A. No idea.

>Q. Did they ever tell you anything at all during the course of the autopsy about what the doctors in Dallas had reported to the media?

>A. No.

>Q. In the ordinary course of an autopsy procedure, would a prosecutor want to know information in the possession of the treating physician of the deceased?

>A. Well, you'd try and get that beforehand, but if you didn't have it and you ran into something unusual or of a bit of a problem, then you might try and do that.

Boswell then discussed when they first considered a bullet passage in the throat. When asked "*Did you reach the conclusion that there had been a transit wound through the neck during the course of the autopsy itself?*", he replied "*Oh, yes*".

>Q. Do you have any impression as to whether the prosecutor should have been informed during the course of the autopsy or before, what the treating physicians in Dallas had learned during the time of the treatment of President Kennedy?

>A. Well, it would have been nice, and we discussed that, actually, because when we first started doing the autopsy, there were marks on the body that we had difficulty--they had started to do cutdowns, and they made little incisions around the nipples, and there was no tubes or anything there. And we didn't know whether they were actually trying to get into vessels or going to get into the chest, whether he had had a hemothorax or something. And then we had difficulty in interpreting the wound in his anterior neck. And at the point when we came to those, we discussed whether or not we might call the Dallas hospital. But we elected not to, and I don't know why at this time.

>Q. When you referred to the wound in the anterior neck, what was your first impression as to what that wound was?

>A. I'm not sure what our first impression-- oh, we thought that they had done a tracheostomy, and whether or not that was a bullet wound, we weren't sure, initially. It was after we found an entrance wound and then the blood external to the pleura that we had a track, and that proved to be the exit wound; but it was so distorted by the incision, initially we just assumed it to be a tracheostomy.

>Q. Did you reach the conclusion that there had been a transit wound through the neck during the course of the autopsy itself?

>A. Oh, yes.

>Q. Did you receive any kinds of written reports at all from Dallas about the nature of the wounds on President Kennedy's body prior to the completion of the autopsy?

>A. No.

>Q. Were you ever told that such written reports had been prepared?

>A. No. And, in fact, we never saw any reports. We may have seen such a report during the Warren Commission's investigation, but we certainly didn't in the early days after the autopsy.

[...]

>Q. Dr. Boswell, I'd like to show you a document that appears as [Exhibit 26]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md26.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md26.pdf)). I'm drawing your attention to page 3. Could you look at the paragraph on page 3 of Exhibit 26 that begins with "The radiologist began his work very early on"?

>A. Just that paragraph?

>Q. Yes, just that one paragraph. You can read as much of the document as you want, but I just have a question for you on that paragraph.

>The document quotes you as saying, quote, that you "thought it was a wound," referring to the tracheostomy. The statement that's here in this paragraph isn't entirely clear. My question to you would

be: Do you recall at any point thinking before the time that you learned that the wound on the anterior neck was the tracheostomy incision that it may have been a wound of some sort?

>A. I think it was pretty obvious from the beginning that it was a tracheostomy wound. Then as the evening progressed, the question became whether it was both an exit wound and a tracheostomy wound, because right in the middle there was what appeared to be the exit wound through which they had cut. I don't understand this.

>Q. When you say "this," you're pointing to the paragraph in document 26?

>A. Yeah, in the deposition here. "Dr. Boswell indicated that regarding the tracheostomy the doctors thought it was a wound." Well, I don't know what I might have said to make them say that, because a tracheostomy wound is a wound, and our conclusions had been that night and then reinforced the next day that it was a tracheostomy through a bullet wound.

([ARRB, 2/26/1996]([https://www.history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Boswell\\_2-26-96.pdf](https://www.history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Boswell_2-26-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/boswella.htm>)])

### **\*\*Timeline of Dr. Perry\*\***

At an undetermined point in time, lead autopsy pathologist Dr. James Humes had a phone conversation with Dr. Malcolm Perry of Parkland Hospital. This is when Perry confirmed to Humes that the surgical incision in Kennedy's throat was originally a small bullet wound.

Humes' early statements did not specify the hour or timeframe when this phone call took place, just that it happened on the morning of 11/23/1963 ([WC Vol. 17, p. 29, Humes' handwritten notes] (<https://www.maryferrell.org/showDoc.html?docId=1134#relPageId=55&tab=page>); [WC D 77, autopsy protocol](<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=3&tab=page>) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>)]); [WC Vol. 2, p. 347, Humes Warren Commission testimony, 3/16/1964]([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>)]). However, the body examination may have lasted past midnight, and the pathologists stayed in the morgue at Bethesda Hospital until the body was prepared for burial by 3:30-4:00 AM. It is not exactly sure when the examination ended and the restoration began. In Humes' statements made years later, he said he remembered calling Perry "*11 in the morning, perhaps 10:30, something like that*" ([HSCA Vol. 7, p. 243, HSCA interview with Humes and Boswell, 9/16/1977] ([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59Ia\\_HumesBosw.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M59Ia_HumesBosw.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7f.htm>)] [[audio]([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_HumesBoswell.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_HumesBoswell.htm))]) or "...*8 or 9 o'clock on Saturday morning*" ([Humes ARRB deposition, 2/13/1996]([https://www.history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Humes\\_2-13-96.pdf](https://www.history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Humes_2-13-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/humesa.htm>)]), only doing so after he went

home, went to a religious function with his family, then returned back to the hospital ([HSCA Vol. 1, p. 323, Humes HSCA testimony, 9/7/1978]([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol1/pdf/HSCA\\_Vol1\\_0907\\_7\\_Humes.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol1/pdf/HSCA_Vol1_0907_7_Humes.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/m\\_j\\_russ/hscahume.htm](http://mcadams.posc.mu.edu/russ/m_j_russ/hscahume.htm))]).

Let's go to Dr. Perry's side of the story. Perry told the Warren Commission there were TWO phone calls between himself and Humes, "*The initial phone call was in relation to my doing a tracheotomy\**", and "*The second conversation was in regard to the placement of the chest tubes for drainage of the chest cavity\**". Humes never mentioned more than one call in any of his statements. Perry also originally said he remembered one or both calls occurring on Friday night. On Friday night, the body was still being examined at Bethesda. Bethesda, Maryland uses Eastern Standard Time, which is just one hour ahead of the Central Standard Time used in Dallas, Texas.

From Perry's 3/25/1964 testimony to the Warren Commission:

>Mr. SPECTER. Now, did you have occasion to talk via the telephone with Dr. James J. Humes of the Bethesda Naval Hospital?

>Dr. PERRY. I did.

>Mr. SPECTER. And will you relate the circumstances of the calls indicating first the time when they occurred.

>Dr. PERRY. Dr. Humes called me twice on Friday afternoon, separated by about 30-minute intervals, as I recall. The first one, I, somehow think I recall the first one must have been around 1500 hours, but I'm not real sure about that; I'm not positive of that at all, actually.

"1500 hours" is 3:00 PM in military time.

>Mr. SPECTER. Could it have been Saturday morning?

>Dr. PERRY. Saturday morning-was it? It's possible. I remember talking with him twice. I was thinking it was shortly thereafter.

>Mr. SPECTER. Well, the record will show.

>Dr. PERRY. Oh, sure, it was Saturday morning-yes.

>Mr. SPECTER. What made you change your view of that?

>Dr. PERRY. You mean Friday?

>Mr. SPECTER. Did some specific recollection occur to you which changed your view from Friday to Saturday?

>Dr. PERRY. No, I was trying to place where I was at that time-Friday afternoon, and at that particular time, when I paused to think about it, I was actually up in the operating suite at that time, when I thought that he called initially. I seem to remember it being Friday, for some reason.

>Mr. SPECTER. Where were you when you received those calls?

>Dr. PERRY. I was in the Administrator's office here when he called.

>Mr. SPECTER. And what did he ask you, if anything?

>Dr. PERRY. He inquired about, initially, about the reasons for my doing a tracheotomy, and I replied, as I have to you, during this procedure, that there was a wound in the lower anterior third of the neck, which was exuding blood and was indicative of a possible tracheal injury underlying, and I did the tracheotomy through a transverse incision made through that mound, and I described to him the right lateral injury to the trachea and the completion of the operation.

>He subsequently called back-at that time he told me, of course, that he could not talk to me about any of it and asked that I keep it in confidence, which I did, and he subsequently called back and inquired about the chest tubes, and why they were placed and I replied in part as I have here. It was somewhat more detailed. After having talked to Drs. Baxter and Peters and I identified them as having placed it in the second interspace, anteriorly, in the midclavicular line, in the right hemithorax, he asked me at that time if we had made any wounds in the back. I told him that I had not examined the back nor had I knowledge of any wounds of the back.

[[WC Vol. 6, p. 7]([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Perry.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Perry.pdf))] [[text] ([http://mccadams.posc.mu.edu/russ/testimony/perry\\_m2.htm](http://mccadams.posc.mu.edu/russ/testimony/perry_m2.htm))]]

From Perry's 3/30/1964 WC testimony:

>Mr. SPECTER. Dr. Perry, did you have occasion to discuss your observations with Comdr. James J. Humes of the Bethesda Naval Hospital?

>Dr. PERRY. Yes, sir; I did.

>Mr. SPECTER. When did that conversation occur?

>Dr. PERRY. My knowledge as to the exact accuracy of it is obviously in doubt. I was under the initial impression that I talked to him on Friday, but I understand it was on Saturday. I didn't recall exactly when.

>Mr. SPECTER. Do you have an independent recollection at this moment as to whether it was on Friday or Saturday?

>Dr. PERRY. No, sir; I have thought about it again and the events surrounding that weekend were very kaleidoscopic, and I talked with Dr. Humes on two occasions, separated by a very short interval of, I think it was, 30 minutes or an hour or so, it could have been a little longer.

>Mr. SPECTER. What was the medium of your conversation?

>Dr. PERRY. Over the telephone.

>Mr. SPECTER. Did he identify himself to you as Dr. Humes of Bethesda?

>Dr. PERRY. He did.

>Mr. SPECTER. Would you state as specifically as you can recollect the conversation that you first had with him?

>Dr. PERRY. He advised me that he could not discuss with me the findings of necropsy, that he had a few questions he would like to clarify. The initial phone call was in relation to my doing a tracheotomy. Since I had made the incision directly through the wound in the neck, it made it difficult for them to ascertain the exact nature of this wound. Of course, that did not occur to me at the time. I did what appeared to me to be medically expedient. And when I informed him that there was a wound there and I suspected an underlying wound of the trachea and even perhaps of the great vessels he advised me that he thought this action was correct and he said he could not relate to me any of the other findings.

>Mr. SPECTER. Would you relate to me in lay language what necropsy is?

>Dr. PERRY. Autopsy, postmortem examination.

>Mr. SPECTER. What was the content of the second conversation which you had with Comdr. Humes, please?

>Dr. PERRY. The second conversation was in regard to the placement of the chest tubes for drainage of the chest cavity. And I related to him, as I have to you, the indications that prompted me to advise that this be done at that time.

[[WC Vol. 3, p. 366]]([https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3\\_Perry.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3_Perry.pdf))  
[[text]]([http://mcadams.posc.mu.edu/russ/testimony/perry\\_m1.htm](http://mcadams.posc.mu.edu/russ/testimony/perry_m1.htm))])

When Parkland's Dr. Kemp Clark testified to the Commission on 3/21/1964, he recalled hearing about Perry's two phone calls, but said they happened on the "morning" of Saturday:

>Mr. SPECTER - Did Dr. Perry discuss anything with you prior to that second conference about a telephone call from Washington, D.C.?

>Dr. CLARK - Yes; he did.

>Mr. SPECTER - Would you relate briefly what Dr. Perry told you about that subject?

>Dr. CLARK - Yes; Dr. Perry stated that he had talked to the Bethesda Naval Hospital on two

occasions that morning and that he knew what the autopsy findings had shown and that he did not wish to be questioned by the press, as he had been asked by Bethesda to confine his remarks to that which he knew from having examined the President, and suggested that the major part of this press conference be conducted by me.

>Mr. SPECTER - Was anyone else present when he expressed those thoughts to you?

>Dr. CLARK - I believe that Mr. Price and Dr. Shires were present. I could be wrong on that.

([WC Vol. 6, p. 18]([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Clark.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Clark.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/clark\\_w.htm](http://mcadams.posc.mu.edu/russ/testimony/clark_w.htm))])

Neither Parkland employees, Charles Price nor Dr. George Shires, mentioned hearing about this in their WC testimonies ([WC Vol. 6, p. 104, Shires' 3/23/1964 testimony] ([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Shires.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Shires.pdf)); [WC Vol. 6, p. 148, Price's 3/25/1964 testimony] ([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Price.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Price.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/price\\_c.htm](http://mcadams.posc.mu.edu/russ/testimony/price_c.htm))]). Dr. Clark recalled Perry saying "*he knew what the autopsy findings had shown and that he did not wish to be questioned by the press, as he had been asked by Bethesda to confine his remarks to that which he knew from having examined the President*", even though when Humes was asked in his 3/16/1964 WC testimony "*at the time of your conversation with Doctor Perry did you tell Doctor Perry anything of your observations or conclusions?*", he replied "*No, sir; I did not*" ([WC Vol. 2, p. 247] ([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>)]), and Dr. Perry likewise said in his 3/25/1964 testimony "...*he told me, of course, that he could not talk to me about any of it and asked that I keep it in confidence, which I did*", although he did recall Humes asking "*if we had made any wounds in the back*" ([WC Vol. 6, p. 7] ([https://www.history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Perry.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Perry.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/perry\\_m2.htm](http://mcadams.posc.mu.edu/russ/testimony/perry_m2.htm))]). If Humes really said that to Perry, it would have implied the presence of a back wound.

On 11/14/1968, Perry was interviewed by researcher Harold Weisberg. [As summarized in Weisberg's personal notes] (<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/P%20Disk/Perry%20Malcom%20Dr/Item%2005.pdf>):



>While he does not recall the exact times of the Humes phone calls, he is clear and certain there were two. He says the first dealt with the tracheotomy, even though it was obvious and the second with the bruise to the top of the lung. He acknowledges it is strange that the doctors did not phone him while they had the body before them and that the hour of 10 p.m., Dallas time, would not have been an unusual one, even under normal circumstances, for a doctor to be called. He does not understand why Humes did not phone him then, when he had the body in front of him, and believes it would have been normal [...]

>He maintains that he was not told by Humes what their report would say and disputes Dr. Clark's testimony that he had asked Clark to take his Saturday press conference because of this. He says that on Saturday there was merely a prepared statement issued. I told him of the conflict and its significance, but he maintained his account and recollection to be correct.

[...]

>Apparently not realizing the conflict between his statement and Humes' notes in Exhibit 397, he said the first call was on the trach and the second call on the lungs and the blood he saw there on surgery. There is no such Humes notation.

On 1/11/1978, Perry was interviewed by the House Select Committee on Assassinations:

>FLANAGAN: Dr. Perry, could you go over and describe the conversations that you subsequently had after treating the President at Parkland with Dr. Humes, the surgeon who performed the autopsy?

>PERRY: Yeah. This won't be too accurate, Mark, because I found out, interestingly enough, that later I had my dates a little bit fouled up. They called me twice and I couldn't remember -- I didn't write it down. I've learned to keep better records since then, but -- and I didn't remember exactly when they me and about what, but I was twice back from Bethesda. And the conversation of the first one, as I recall, and I need, I should go back and look at my testimony in my notes here and I haven't done that, I guess, I should have to find out exactly what we're talking about on that first one. But we discussed the thing and I told him about the tracheostomy wound and told him that I had cut right through the small wound in the neck. And Dr. Humes at that time had described that they had had a little difficulty tying up that posterior entrance wound -- as allegedly to be an entrance wound, I shouldn't get in this hot water -- that posterior wound with the -- couldn't find out where it went. And they surmised that during the cardiac massage and everything that perhaps the bullet had fallen out -- which seemed like a very unlikely event to me, to say the least. But at any rate, when I told him that there was a wound in the anterior neck, lower third, he said: "That explains it:" I believe that was the exclamation that he used -- because that tied together their findings with mine. Now there was a second call about the chest tubes, I

think. And I believe that was the next day. I'm not sure of that. Maybe they called me twice that morning.

>PURDY: At one point in your testimony, to help clear it up with you, you said that the calls came about 30 minutes apart.

>PERRY: Was it twice in the same morning? It's possible. There should be something in the record of that. They had a record of it, Andy, and I just don't remember, you know. Between Friday and the President and Sunday and Oswald, and all those conferences and interviews, I got a little bit confused -- because Saturday morning I was asked to come up to the hospital and talk to a whole bunch of people and so I was up there Saturday too. And I don't remember -- but maybe it was two, both., ... Saturday was when they called?

>PERRY: Yeah, twice.

>FLANAGAN: I believe so.

>PERRY: But they called twice. And they asked me about the chest tubes--or something to that effect. Was it chest tubes?

>PURDY: Yeah. In your testimony you say that "the initial phone call was in relation to my doing a tracheotomy," and you informed them...

>PERRY: ...that I'd cut right through the wound.

>PURDY: Right. Do you remember whether or not there was any discussion in either of the calls about whether there had been any surgical incisions made in the President's back?

>PERRY: I don't remember. I don't know why they would. He might have asked me, but I didn't even look at his back--so I wouldn't have known the answer to that if there had been. But I don't recall him asking that question. He might have asked -- I got asked so many questions along about that time, I don't remember who asked them. I didn't even look at Mr. Kennedy's back -- which was another thing I wish we'd have done.

[...]

>PURDY: As you recall, your testimony says that the second conversation you had with Dr. Humes was in regard to the placement of the chest tube for drainage of the chest cavity.

>PERRY: It's interesting to me -- and I'm not being critical-but it's interesting to me that the pathology

report does not reflect that. The autopsy report said that those incisions were made to combat subcutaneous emphysema, which is not a -- in the current jargon -- a viable therapeutic technique.

([HSCA Vol. 7, p. 292]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59If\\_Perry.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M59If_Perry.pdf)) [[text](<http://mcadams.posc.mu.edu/russ../jfkinfo/hscv7f.htm>)] [[audio]([https://www.maryferrell.org/audio/HSCA/HSCA\\_Perry.mp3](https://www.maryferrell.org/audio/HSCA/HSCA_Perry.mp3))])

When Parkland's Dr. Paul Peters was interviewed on 5/1/1981 by journalist Ben Bradlee, he described contact being made with Bethesda on the same day of the assassination, with details from the autopsy leaking among themselves.

>[...] You see, we did find out almost immediately after President Kennedy was taken to Bethesda that there was a hole in the neck that we had not seen at the time. Now Dr. Jenkins, I believe, has said later that he did see it. But I did not know that it was there at the time that we resuscitated President Kennedy. There is therefore, there are two wounds that we didn't know about at the time. The one in the neck posteriorly and then what was subsequently found underneath the hair, the wound of entry in the occipital area on the right side.

[...]

>A. What I thought at the time was, as I told you, that he had been shot in the neck. See, it was only, it was going to be a few hours before I would know that the bullets were fired from behind. I thought, seeing the patient, if I had just walked in now and saw a patient like that who had a small hole in his neck and a large wound in the back of his head, I would have thought the bullet had entered here and exited through the back of his head. That's what I thought at the time. But then we began to get more information, that there was a wound in the back of the neck, and also a second hole was found in the skull, and I learned the President had been shot twice. Why, there were other explanations that appeared more rational.

[...]

>[...] But it was only a few hours later when we began to get calls back from Bethesda, that we learned that there was a wound in the back of the neck that had gone through, see? And that he had been hit twice, and of course the Zapruder film subsequently showed that.

([[Transcript]([http://www.kenrahn.com/Marsh/Jfk-conspiracy/PETERS\\_P.TXT](http://www.kenrahn.com/Marsh/Jfk-conspiracy/PETERS_P.TXT))] [[transcript 2](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/P%20Disk/Parkland%20Hospital/Item%2010.pdf>)])

When Parkland's Dr. Robert McClelland appeared at a panel discussion on 4/6/1991, he apparently claimed to remember being present while Perry was on the phone talking with Humes. He said the call happened "*the next afternoon*": "...*Well, Mac said that it looked like an entrance wound to him, the initial small hole that he enlarged to make the tracheostomy, he said looked like an entrance wound. And one of the doctors from Bethesda- I remember we officed together- the next afternoon, called Malcolm and talked to him about the wound in the neck. I remember hearing Malcolm- I believe that*

*was, it was, yeah, I'd forgotten- and they discussed that and the nature of the wound at that time\*\**  
([[Video](<https://www.youtube.com/watch?v=QpmMa10KNHo>), 59:50])

On 8/2/1997, Parkland's Dr. Charles Carrico was interviewed for the Sixth Floor Museum. Carrico spoke as if he remembered being there when Perry was contacted by Bethesda. He said the phone rang on Saturday morning.

>Q: When the autopsy was performed, the information that came back to you, or to Dallas, however that came about, what was your reaction then, you remember?

>A: Well, the first- you know, we- we had- we'd, you know, Friday night had been busy. We'd taken care of those three patients that were waiting, and that...

>Q: Well, I want to- I want to get the details of that weekend too, but... while we're on this subject-

>A: Saturday morning was our- our mortality and morbidity conference. Every Saturday morning, we sat down, went through all the cases we'd done during the week, and anything that had gone wrong, we analyzed what had gone wrong, and- which is a fairly typical medical approach to things. So, we were in our Saturday morning conference when the phone rang, and it was the pathologist in Bethesda trying to get ahold of Dr. Malcolm Perry to get some medical information. And that was the first time, I think, that the pathologist in Bethesda knew that there was a wound here [pointing to center of neck], because all they saw, apparently, was a hole here [pointing to back right shoulder], a little hole here [pointing to back center of head], big hole here [right side of head], and a tracheostomy wound. And it- and since they didn't have any medical records, they didn't- they couldn't figure out how in the world three holes connected. So, they called Malcolm, and that's when they told him that there was, you know, that these other two wounds were there, and that's when it kind of began to make sense that bullet went in here [pointing to back of neck], came out here [pointing to center of neck], nicked his trachea, maybe hurt his spinal cord, didn't kill him. And then the second bullet went in here [pointing to upper back portion of head], hit the bones inside his head, came out here [holding right side of head] and blew that big hole out. So that- that was the first time we could really put things together in a way that made sense.

>Q: And what you were hearing from them, and- and after those discussions, it did make sense to you?

>A: Yes... 'cause before, we- see, this hole and this hole, didn't know whether there were holes back here or not, and we were trying to speculate how these two could connect, and that- it's hard to make any sense out of that.

([[Video](<https://www.c-span.org/video/?179175-1/kennedy-assassination-40th-anniversary>)] [[link 2] (<https://www.youtube.com/watch?v=G7ngt-SqGv0>)])

On 8/27/1998, the Assassination Records Review Board had a group interview with Parkland Drs. Charles Baxter, Ronald Jones, Robert McClelland, Malcom Perry, and Paul Peters. Again, McClelland claimed he was in the room while Perry was on the phone with Humes. McClelland, like Perry, said he was aware of two separate phone calls taking place. The verbiage here is not totally clear, but Perry may have changed his opinion on the timing of the two phone calls. Either way, two phone calls were described, not one like Humes always claimed.

>MR. GUNN: In the first two or three days after the assassination, did you meet together at all and talk about it and try to put the pieces together of what you had observed and what you were hearing from the press?

>DR. JONES: I don't think as a group that I remember everyone sitting down putting all this together. I don't remember us all sitting down like today, which is one of the nice things to be able to come together today, because I don't remember that we ever sat down as a group of five and discussed this. Individually, something this dramatic, you're going to intermittently exchange comments with one another, but I don't think we tried to sit down and put it together.

>DR. McCLELLAND: Talked about it a lot informally because at that time all of our offices were in very close connection with one another, so we just kind of while going to the rest room or going down to get a cup of coffee, you sort of informally talked here, there, and wonder, but we didn't say let's have a meeting and review.

>MR. GUNN: With the exception of Dr. Perry -- and I'll come back to him in just a moment -- did any of you talk with any of the autopsy doctors in Bethesda in the week or so after the assassination?

>DR. JONES: No, I didn't.

>MR. GUNN: you're all shaking your head. If you can --

>DR. McCLELLAND: Dr. Perry and I office together. I remember him getting the call and listening to him talk to him.

>MR. GUNN: Dr. Perry, there was obviously a controversy at the time of your deposition by doc -- or by Mr. Specter regarding whether you had received the call in the evening of the 22nd or the following morning.

>I know that memory does not improve with age, but I'm just wondering If you have had any subsequent thoughts that help you to place that telephone call better?

>DR. PERRY: I thought we settled that. We talked to Dr. Humes. There was a lot of stuff going on, but I thought he said he'd call me the next morning now that I recall.

>DR. McCLELLAND: Yeah, that's what it was. No question.

>DR. PERRY: And I may have said -- there was a lot of stuff happening on Friday, of course, but as I recall, he called me the next morning and, of course, he did not know about the trach that I'd done, and he did not know about the anterior wound in the neck since I disfigured it somewhat with the incision. And when he inquired about that, things really fell into place then because he had a wound in the posterior to account for that one. So things kind of came together

>MR. GUNN: Dr. McClelland, you said there was no doubt about the timing of that and that's because you were in the office yourself?

>DR. McCLELLAND: I was as far as I am from you.

>MR. GUNN: So ten feet or so?

>DR. McCLELLAND: Yeah.

>DR. PERRY: It was Saturday morning sometime, but I don't know what time.

>DR. McCLELLAND: uh-huh, middle of the morning sometime.

>DR. PERRY: Huh?

>DR. McCLELLAND: Middle of the morning sometime.

>DR. PERRY: There was a scheduled conference -- press conference on Saturday morning and I'd asked Dr. Shires to accompany me to it. And I'd asked Dr. Clark to accompany me to those press conferences for the same reason. And this was conducted in Mr. Price's office and had to do -- I think --

>THE COURT REPORTER: Can you speak up, Doctor?

>DR. PERRY: I'm sorry. It was conducted in Mr. Price's office, who was administrator there at Parkland and there Jimmy Breslin and Richard Valeriani and a group of media were there and they wanted to talk about it, and that was Saturday morning sometime. And I asked Dr. Shires to accompany me there; that I was not willing to go to the press conference unassisted as it was without senior counsel, if you will, having had a really bad experience the day before. And so -- but don't know what relation that was to the phone call before or after -- this must have been after because I think it terminated about noon. I don't recall exactly.

>DR. JONES: You had -

>DR. McCLELLAND: Well, it wasn't -

>DR. JONES: You had talked to me. We were making rounds, as I recall. There was three or four of us

and we were going through the hall into the back side of the cafeteria Saturday morning, as I recall, and you had mentioned at that point that you had received a call.

>DR. PERRY: So it was early?

>DR. JONES: It must have been before the -- your conference.

>DR. PERRY: Yeah, I think so.

>DR. JONES: -- because I know it-

>DR. PERRY: That sounds about right.

>DR. JONES: Earlier in the morning I was -

>DR. PERRY: You know, as you might expect, Mr. Gunn those of us who are involved in our end of the business don't keep those kind of logs. You recognize the importance of exact time and date with respect to things - in the legal profession you do, but we don't think that way.

([ARRB, 8/27/1998]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Parkland\\_8-27-98.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Parkland_8-27-98.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/arrbpark.htm>)])

In 2009, Dr. McClelland was interviewed by Canadian radio broadcaster Brent Holland.

>Q: Sir, when you were looking at his body, did you notice any other wounds in any other areas of his body?

>A: No, and we didn't go over his body, all over his body, and we did miss a wound, as we learned the next day from the pathologists at Bethesda Naval Hospital. The missed the wound in his back, but he had no other wounds [...]

([Audio](<https://jfk-archives.blogspot.com/2011/05/robert-mcclelland.html>), 15:44] [[audio 2] (<https://dvp-potpourri.blogspot.com/2010/12/dr-robert-mcclelland.html>)] [[audio 3] (<https://www.youtube.com/watch?v=y0FzWfaX-YQ>)])

In 2013, McClelland spoke with Dr. Rod Rohrich from the American Society of Plastic Surgeons. This time, McClelland said he remembered Perry being called on "*\*Saturday morning, about ten o' clock or so\**".

>Q: What was the level of communication, then, between you all as the physicians and then the- when the autopsy was done in Bethesda, did you all speak?

>A: Dr. Perry and I had an office together at that time, and the following Saturday morning, about ten o' clock or so, we were sitting in our office, again, kind of, you know, going over what had happened, and the phone rang, and Dr. Perry answered it, and he was talking to Dr. Boswell, who was one of the autopsy pathologists who had just completed the autopsy, and he was asking Dr. Perry some questions about what we had seen and done here.

(Here, McClelland is apparently confusing Dr. Humes for Dr. Boswell)

>I couldn't hear the exact things he was saying, of course, but from Dr. Perry's responses, I sort of knew what questions Dr. Boswell had asked Dr. Perry. And so, the thing that had caused some confusion was this wound in the neck and whether it was an entrance or an exit wound. And, of course, when we saw the President, we had no knowledge of what went on in Dealey Plaza. And Dr. Perry, when he saw it, and this is what he basically told Dr. Boswell, that he thought it was an entrance wound from the size of the hole. And, of course, he initially had not seen the wound in the back of the President's head. And he told- in fact, all the newsmen gathered upstairs at Parkland right after the assassination- or, right after the President died, Dr. Perry and Dr. Clark were interviewed by probably fifty or sixty newsmen up there where we usually had grand rounds at Parkland, and Dr. Perry said that apparently this was an entrance wound.

>Q: Into the neck?

>A: Into the neck. And, of course, as it turns out, it may have been- I say may because we still don't really know- from a bullet that went in through his back, almost- whether it was near the junction of the neck in the back or lower, that's an uncertainty. But- in fact, Dr. Boswell asked Dr. Perry did we turn the President over and see that there was a bullet wound in the back, Dr. Perry said no we didn't get a chance to turn him over because how rapidly everything transpired. We immediately started to work on the wound in the neck, and then when he died, we felt it was inappropriate for us to do anything at that time.

[[Video]](<https://journals.lww.com/plasreconsurg/pages/videogallery.aspx?videoId=419&autoplay=true>) [[link 2]](<https://www.youtube.com/watch?v=VxC7YduICBY>)

Should the later-day statements of Carrico and McClelland be trusted over Perry's earlier statements? The more time passes, the more unreliable a person's memory of an event becomes. And in general, memory declines with age. So, the best evidence from Parkland indicates that Perry talked to Humes closer to Friday night rather than Saturday morning.

**\*\*John Stringer\*\***

John Stringer was the autopsy photographer ([WC D 7, p. 280] (<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>); [HSCA Vol. 7, p. 8] ([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M2\\_Autopsy.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M2_Autopsy.pdf)) [[text]](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)). Stringer said he remembered the pathologists making contact with Parkland Hospital while they were still examining the body in the morgue. If correct, the pathologists were probably being deceitful when telling their side of the story.



From a report on Stringer's 8/17/1977 interview by the House Select Committee on Assassinations:

>MR. STRINGER recalled a conversation about the pathway through the neck and specifically discussion about air in the throat. He remembers a great deal of discussion and concern as the doctor searched for a missing bullet. He believes HUMES instituted the call to Dallas.

[...]

>STRINGER recalls that during the autopsy someone was asked to call Parkland.[...]

>[...] Regarding photograph #40, MR. STRINGER said the doctors were debating whether the hole was caused by a bullet.

([ARRB MD 19]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md19.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md19.pdf))  
[[text](<http://www.kenrahn.com/Marsh/Autopsy/2070.TXT>)])

Stringer's claim that he remembered the pathologists discussing "*\*air in the throat\**" sounds similar to Dr. Malcolm Perry's description of "*...\*both blood, free blood and air in the right superior mediastinum. That is the space that is located between the lungs and the heart at that level\**", "*...\*The air was indicated by the fact that there was some frothing of this blood present, bubbling which could have been due to the tracheal injury or an underlying injury to the lung\**" ([WC Vol. 3, p. 366, Perry's 3/25/1964 WC testimony]([https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3\\_Perry.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3_Perry.pdf))  
[[text]([http://jfkassassination.net/russ/testimony/perry\\_m1.htm](http://jfkassassination.net/russ/testimony/perry_m1.htm))]). A handwritten note by Dr. Humes relays information provided by Perry as "*\*blood & air in upper mediastinum\**" ([WC Vol. 17, p. 29] (<https://www.maryferrell.org/showDoc.html?docId=1134#relPageId=55&tab=page>)), and this was elaborated in the official autopsy protocol as "*...\*A tracheostomy was performed by extending the latter wound. At this point bloody air was noted bubbling from the wound and an injury to the right lateral wall of the trachea was observed. Incisions were made in the upper anterior chest wall bilaterally to combat possible subcutaneous emphysema\**" ([WC D 77](<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=3&tab=page>)  
[[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>)]).

When Stringer later spoke with the Assassination Records Review Board, he said that he remembered the throat wound being probed as well as the back wound.

From a report summarizing his 4/8/1996 interview by the ARRB:

>Q: Do you recall a probe being used during the autopsy?

>A: Yes, a long metal probe was used to probe the neck wound.

>Q: When you say that do you mean the back wound, that is to say, the wound entering from the back, or do you mean the wound in the front of the neck, in the throat?

>A: The probe was inserted in the throat wound in the front of the neck.

([ARRB MD 227]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md227.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md227.pdf) ))

From Stringer's 7/16/1996 ARRB deposition:

>Q: Did you see metal or any other kind of probes being used during the autopsy?

>A: Yes.

>Q: Did you take any photographs with probes in the body?

>A: Not that I can recall.

>Q: Were any probes put inside the cranium that you recall?

>A: I don't think so. I think it was primarily in the neck area.

>Q: Was the probe put into the neck, or did it come out of the neck?

>A: It was put into the back part.

>Q: The back of the body. And then did the probe come out the neck?

>A: No.

>Q: So, when you're referring to the neck, you're referring from behind?

>A: From behind.

[...]

>Q: Okay. At the time the autopsy was concluded—So, we're back to November 22nd, 23rd. At the time the autopsy was concluded, had the doctors reached any tentative conclusion about the number of shots or the angle of the shots that had hit President Kennedy?

>A: I think they had, yes.

>Q: What was your understanding of the number of shots that had hit him.

>A: Two.

>Q: And where—what was the trajectory of those shots in the body?

>A: One from the back that came out the side. And then the other one, from down in the neck, came out here.

>Q: You have a recollection that during the night of the autopsy, the doctors believed that there was—that the wound in the front of the neck was an exit wound from the back?

>A: I think so.

>Q: Do you recall any telephone call between the autopsy room and Dallas with doctors at Parkland Hospital?

>A: I think it was the one—Yes. I think it was one of the agents. I'm not sure.

>Q: Did they report—did any of the agents report what doctors in Dallas had said regarding wounds on the President's body?

>A: I heard somebody say something about a tracheotomy.

>Who said it, I don't know.

>Q: Did the agent report anything about there being a bullet wound in the same location as the tracheotomy?

>A: I don't remember. I don't remember if anybody said that, but—

[...]

>Q: Would you say that this tracheotomy incision is larger, smaller, about the same size as the average tracheotomy incision?

>A: It looked like—it looks like it was done in a hurry, so it's probably a little larger.

>Q: Is it a little larger; substantially larger? How would you characterize it?

>A: Maybe a little larger. It was probably done by a doctor. Off the record.

>Q: At any time during the autopsy, did any of the doctors attempt to determine whether there were any bullet fragments in the anterior neck wound?

>A: Yes.

>Q: What did they do?

>A: Well, they checked on the X-rays. Did it by feel, or vision.

>Q: When you say "by feel", what do you mean?

>A: By feeling, to see if there was anything sharp or—

>Q: So, the doctor's fingers then would have been put into the tracheotomy wound, to attempt to determine whether any bullet fragments—

>A: And I think there was a probe put in there, too.

>Q: And the probe was put in from the front towards the back?

>A: Yes.

>Q: And what was the direction of the probe, if you recall?

>A: It went straight in. I don't know. I don't know. All—I saw it in. I don't know whether it went up, down—you know, sideways, or what.

>Q: Was the body propped up, so the torso was in a vertical position when the probe was put in the neck?

>A: I think it was, at times. I think so.

([ARRB, 7/16/1996]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Stringer\\_7-16-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Stringer_7-16-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/stringer.htm>)] [[audio]([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/audio/ARRB\\_Stringer.htm](https://history-matters.com/archive/jfk/arrb/medical_testimony/audio/ARRB_Stringer.htm))])

**\*\*John Ebersole\*\***

John Ebersole was the radiologist at the autopsy ([WC D 7, p. 280] (<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>); [HSCA Vol. 7, p. 8]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M2\\_Autopsy.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M2_Autopsy.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>)]).

Ebersole is another witness who described being in the morgue when the pathologists made contact with Dallas.

Additionally, Ebersole claimed the body appeared at the beginning of the autopsy with the defect in the throat sewn shut. This was not reported by any other witness. The throat may have been sutured during the restoration AFTER the autopsy, but Ebersole said it was like that in the first place. If that aspect of Ebersole's story is true, nobody has come forth explaining when or why the suturing occurred.

On 3/9/1978, Ebersole was interviewed by Gil Delaney of the Lancaster (PA) *Intelligencer-Journal*. As summarized in the 1980 book *\*Best Evidence: Disguise and Deception in the Assassination of John F. Kennedy\** by David S. Lifton:

[Part V - *\*The X-Rays and Photographs: 1971-78\**, Chapter 23. *\*Allegations of Dr. John Ebersole\**]

>[...] First, I had to find out the source of the story—who had interviewed Ebersole? Did a tape exist? Soon I learned that the *\*Philadelphia Inquirer\** story was a condensation of a much longer one done in Dr. Ebersole's hometown newspaper, the *\*Lancaster\** [Pennsylvania] *\*Intelligencer-Journal\**.

>I contacted reporter Gil Dulaney, who sent me the story which had appeared on March 9, 1978, two days before Ebersole went to Washington. The headline was: BREAKS 15-YEAR SILENCE ON KENNEDY X-RAYS, CITY RADIOLOGIST DID AUTOPSY X-RAYS ON BODY AT BETHESDA. Most of the story was a straight interview and, clearly, Dr. Ebersole, a supporter of the lone-assassin theory, was not aware of the implications of the suture information, nor for that matter of the implications of the description of the head wound. Ebersole was quoted as follows: "When the body was removed from the casket there was a very obvious horrible gaping wound to the back of the head."

^8 That description was the same as what McHugh and Stringer told me— it was totally inconsistent with what the photographs showed, according to all reliable reports.

>As to the sutures, the story described how Ebersole repeatedly took X-rays of the body, unaware that the hole at the front was a bullet wound. " 'We could not find any exit wound . . . . There was, however, at the base of the throat a very neatly sutured, neatly sewn, opening that we interpreted initially as a surgical wound.'

>"The radiologist said it appeared someone had done a tracheotomy on Kennedy and then, after death, removed the tube from Kennedy's throat and sewn up the incision." ^9

>The story then described how the autopsy personnel discovered that the sutured hole was really a bullet wound: Around 11:00 or 11:30 P. M. on the night of Nov. 22, 1963, those doing the autopsy on Kennedy got in touch with medical officials who had treated Kennedy in Dallas and it was only then that they realized that the hole that had been sewn up in Kennedy's throat was actually the bullet's exit wound. Ebersole was then quoted: " 'They did a tracheotomy and then removed the tracheal tube after death and surgically repaired the wound, post-mortem.' " ^10

>Reporter Gil Dulaney apparently did not realize the implications of the information volunteered by Ebersole. Dulaney told me how the interview had come about. One night, after Ebersole was to testify, Ebersole's wife called him up and said: "My husband took the X-rays of John Kennedy. And he's going to be up to the House Assassinations Panel. Would you like to interview him?" ^11

>I asked Dulaney if he would share his original transcript with me, and he read portions of it to me on the phone. Dulaney's quotes in the article were verbatim from the transcript.

From Ebersole's 3/11/1978 testimony to the House Select Committee on Assassinations:

>The autopsy proceeded and at this point I am simply an observer. Dr. Humes in probing the wound of entrance found it to extend perhaps over the apex of the right lung bruising the pleura and appeared to go toward or near the midline of the lower neck.

>I believe by ten or ten thirty approximately a communication had been established with Dallas and it was learned that there had been a wound of exit in the lower neck that had been surgically repaired. I don't know if this was premortem or postmortem but at that point the confusion as far as we were concerned stopped.

>The only function that I had was later in the evening, early in the morning, perhaps about twelve thirty a large fragment of the occipital bone was received from Dallas and at Dr. Finck's request I X rayed these. These were the last X rays I took. The X rays were taken by the Secret Service that evening; I did not see them again.

[...]

>Dr. Baden. Do you recall seeing those three fragments and X raying the bones?

>Dr. Ebersole. Yes. This was maybe midnight to one o'clock when these fragments arrived from Dallas.

>Dr. Baden. After the autopsy?

>Dr. Ebersole. The autopsy was still going on during that period.

>Dr. Baden. And it is your impression that before the autopsy was finished at ten thirty at night contact had been made between Dr. Humes and --

>Dr. Ebersole. I must say these times are approximate but I would say in the range often to eleven p.m. Dr. Humes had determined that a procedure had been carried out in the anterior neck covering the wound of exit. Subsequent to that the fragments arrived. At the time the fragments were X rayed Dr. Finck was present.

>Dr. Baden. Do you have any idea, what did you do with the fragments after you finished X raying them?

>Dr. Ebersole. Returned to the autopsy room. They were kept in the autopsy room.

[...]

>Dr. Weston. I am not clear on the chronology. When you first started talking you gave the impression that everybody had the impression that there was a bullet hole in the back of the neck. You gave me the impression that they rolled the body over almost immediately. Is that a correct impression?

>Dr. Ebersole. I don't know whether we looked at the anterior or posterior aspect first. I would suspect it was posterior.

>Dr. Weston. You looked at the posterior first?

>Dr. Ebersole. A head wound and a wound of entrance.

>Dr. Weston. They saw the wound of entrance on the back of the neck almost immediately?

>Dr. Ebersole. Yes. At least immediately, yes. This again is a question of recollection of whether it was the posterior or anterior surface.

>Dr. Weston. But you said they didn't recognize this as being an exit wound until after the conversation with Dallas which was ten or ten thirty.

>Dr. Ebersole. Or later.

>Dr. Weston. By that time you had already taken two sets.

>Dr. Ebersole. No, no, no.

>Dr. Weston. Oh.

>Dr. Ebersole. When both aspects of the body had been viewed, and I do not know in what order they were reviewed, we were faced with the problem of a wound of entrance and not a known wound of exit, so at that point we perhaps would never I have taken any X rays had we had a wound of entrance

and a wound of exit. Remember, I am standing by waiting for the prosector to start with my X ray equipment. We had certainly not to my knowledge planned to take any X rays at this autopsy but when it became apparent we had a wound of entrance and no known wound of exit, this is when I was brought into the action.

[...]

>Dr. Ebersole. We can put this back on when we get the tape on but somewhere during the course of the evening the input came in from Dallas about the wound exit in the neck. That I think stopped the problem from my aspect of taking the X rays. I cannot tell you what time that was. The time is rather vague that night but it was quite late in the evening.

>Dr. Petty. Do you want him to repeat what he just said?

>Mr. Flanagan. Yes, if you would, please.

>Dr. Ebersole. The taking of the X rays again were stopped to the best of my remembrance once we had communication with Dallas and Dr. Humes had determined that there was a wounded exit in the lower neck anterior at the time that the President arrived at the hospital in Dallas. I think once that fact had been established that my part in the proceedings were finished.

>Dr. Petty. May I ask two questions further. One, did you see the wound in the neck and associate it with a bullet wound of exit after it had been pointed out that the tracheostomy had been through that area?

>Dr. Ebersole. No, sir, I can't say that I did. After the dissection had started I saw the area that Dr. Humes was very interested in. He pointed out to us that this was a track running over the apex of the lung -- I think he used the term bruising the apex of the lung and pointed to the middle line. I remember the area was open and he was pointing this out to us. I cannot recollect if I saw this area again after that information was known to him.

>Dr. Petty. All right. The second question that I have is you said that you left the autopsy area somewhere around three o'clock in the morning.

>Dr. Ebersole. Yes.

[...]

>Dr. Wecht. Dr. Ebersole, hypothesize with me for a moment, please, that if on the autopsy evening Dr. Humes or any of the other physicians or people present had not received information at that time that there had been a bullet entrance wound in the front of the neck, that no such information was known by anybody on that evening, what would be your professional opinion as a radiologist -- what would it have been at that time concerning the need or desirability for taking additional x ray pictures?

>Dr. Ebersole. I think we would have had to — I would like to try to keep retrospective thinking out of this but it is difficult. I think had we not had that information eventually, I would have wanted to take the body to the main X ray department and do an honest to God total body radiograph. It is remotely possible a bullet entering the back can end up in the ankle but again the hypothetical case, I think this is what we would have done.

[...]

>Dr. Baden. Is it your impression perhaps, and again as Dr. Wecht said 15 year old memories get clouded, if we assume that the information about the tracheostomy through a bullet hole was not available to the doctors that evening but came later on, could there have been a tentative conclusion reached was there a tentative conclusion reached that evening that in fact the bullet entering the back region had dropped out and that is why it was not present and that explained the autopsy and X ray findings?

>Dr. Ebersole. I don't remember such conclusion being reached but assuming it, I suppose it could have.

[...]

>Mr. Purdy. One other question I have has to do with the nature of the information you received from other sources on the night of the autopsy. You mentioned a phone call which helped clear up confusion.

>Dr. Ebersole. Somewhere in the course of the evening Dr. Humes received information from Dallas re the procedures that had been carried out there, number one. Number two, somewhere in the course of the evening Dallas sent to us the bony fragments you saw which were X rayed as to how this was carried out. The mechanics I don't know. Somewhere in the course of the autopsy Dr. Humes was made aware of the surgical procedures at Dallas vis-a-vis the neck.

>Mr. Purdy. And what was that information?

>Dr. Ebersole. The information was that there had been a wound of exit there, a tracheotomy and a suturing done.

>Mr. Purdy. Do you recall how that information was conveyed to Dr. Humes?

>Dr. Ebersole. I don't. I don't recall.

([ARRB MD 60]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md60.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md60.pdf))  
[[text](<http://mcadams.posc.mu.edu/russ/testimony/ebersole.htm>)] [[audio]([https://history-matters.com/archive/jfk/hsca/med\\_testimony/audio/HSCA\\_Ebersole.htm](https://history-matters.com/archive/jfk/hsca/med_testimony/audio/HSCA_Ebersole.htm))])

Ebersole was interviewed by Art Smith of *\*The Continuing Inquiry\** newsletter, as reported in it's [7/22/1978 issue](<http://digitalcollections.baylor.edu/cdm/ref/collection/po-jones/id/1854>):

>Dr. John Ebersole was assistant Chief of Radiology at Bethesda Naval Hospital on November 22, 1963 and personally took 14 x-rays of John Kennedy during the autopsy. He stated he attended the autopsy from approximately 8:00 p.m. on 11/22/63 to 4:00 a.m. On 11/23/63.

>His x-rays of the body were to try and find any bullet that had lodged itself within the body. He took two sets of x-rays; one at approximately 8:30 - 9:00 and another set around 1:00 a.m. On 11/23/63. He has stated that no missile could be found from these x-rays. This process took approximately 15-20 minutes each time. It is fair to state that Dr. Ebersole attended most of the autopsy.



[...]

>I asked who was in attendance in the room and he mentioned that there were many people including Dr. Humes, Finck, Dr. Boswell, F.B.I Secret Service and many military figures including an Admiral Kinney who ordered that the neck wound not be dissected to find a tract of the bullet path.

[...]

>Dr. Ebersole also mentioned that three bone fragments had been flown up separately to Bethesda approximately 12:00 midnight and he was told to x-ray these.[...]

[...]

>Dr. Ebersole also stated that when they brought in the body and placed it face up he noticed that the throat wound had been "sewed up and that they could not tell whether the wound in the throat had been caused by a bullet". The only way they found out about the throat wound was to call Dr. Perry at Parkland Hospital. Dr. Ebersole also described the wound as elongated.

>I have checked references pertaining to the throat wound and could not find any mention of the throat wound being sewed up by any doctor at Parkland Hospital. Dr. Perry noticed the throat wound when President Kennedy was brought in and immediately for a trache tube from one of the nurses. "He then extended the wound with two incisions because the wound was approximately where he would have made an incision for a tracheotomy." ^4

[...]

>Dr. Ebersole stated this was a wound of exit but I can't understand why he is so sure except that he states that the back wound is in line with the throat wound.

[...]

>In reference to the throat wound again, Dr. Ebersole stated that "the throat area had an exit wound."  
[...]

[...]

>He did say that "three fragments of skull up from Dallas that evening and he x- rayed them approximately between 12:30 and 1:00 a.m. On 11/23/63."

Smith's information on Ebersole was elaborated in Lifton's book *\*Best Evidence\**:

[Part V - *\*The X-Rays and Photographs: 1971-78\**, Chapter 23. *\*Allegations of Dr. John Ebersole\**]

[...]

>Soon I learned of another, even more detailed interview. Shortly after the Dulaney story appeared, Art Smith, a schoolteacher from nearby Chester, Pa., telephoned Ebersole and obtained an in-person

interview with permission to use a tape recorder. Smith made his tapes available to me. Smith's interview was on March 28, 1978, and lasted well over an hour. Ebersole left no doubt that the throat wound was sutured.

>At great length, Ebersole explained why he had repeatedly X-rayed the body, and why he had used a portable machine rather than bring the body to the X-ray department: ". . . we were looking for a metal slug that you can pick up with any old X-ray machine. Again, I think . . . that probably is a point I want to really emphasize—the X-rays were taken not because we thought they would add anything to the overall story—", and now Ebersole pounded the desk as he talked, "where is the round that caused this wound of entrance [i.e., the entry at the rear of the neck] and no wound of exit? Even after dissection, the pathologist did not find it, and an agent, a non-medical person, asked me to take the X-rays again, in order that he could be convinced there wasn't a slug there."

>Ebersole explained how the matter was cleared up: ". . . somewhere in the course of the evening we were in communication with Dallas, and determined that there had been a wound of exit at the throat, which had been sutured. That, to me, solved the problem. There's no need to take any more X-rays, or anything else. We have a wound of entrance, and now, historically, we have a wound of exit. Remember the sutured wound we saw . . . [it] looked as if someone had done a tracheotomy and perhaps sewed it up. It was neat. It was surgical. Certainly, in my eyes, it was."

>When the interviewer related Dr. Perry's description of the wound as an entrance, Dr. Ebersole—in the spirit of one professional disagreeing with another—said: "That's his privilege. To my knowledge, what I saw was certainly a wound of entrance in the back; and later on, an explanation was given for why we didn't identify a wound of exit." Raising his voice for emphasis, he continued: "It had been dickered with. Through a surgeon's knife, or sewing up, or tracheotomy; it certainly had been changed from whatever it was. Which is unavoidable if they are going for a lifesaving thing like a tracheotomy."  
^12

[...]

>Still another dimension to the "sutured wound" issue: The FBI was given President Kennedy's clothes within twenty-four hours, and its own documents prove the FBI Lab had examined them by the morning of November 23, 1963. Yet despite that, the FBI omitted from its December 9, 1963 report any pictures of the clothing, or any mention that the President's clothing showed a bullet hole at the front of the throat. This had always seemed peculiar. But when joined with Dr. Ebersole's suture allegation, it raised the question of whether there wasn't a plan afoot in the early hours to actually hide a bullet wound. The first Dallas Field Office report to state that the President's clothing had a hole at the front was dated December 23, 1963, and the first Summary Report to do so was dated January 13, 1964. Once I had gathered together Smith's tapes, Dulaney's article, and the portions of his original transcript read over the phone, it became clear that Dr. Ebersole's information was important for still other reasons.

[...]

>Another quote: "Later on in the evening, between midnight and 1:00 A.M., a large portion of the skull was sent up from Dallas . . . that represented the back portion of the skull."\* ^15

If the autopsy began with the wound in the throat already sewn like Ebersole claimed, this implies it must have been subsequently opened back up like it appears on the [autopsy photographs] (<https://drive.google.com/open?id=1oBvb0A9Sqge-mJVUMxtvt8bsemRTlh5Y>). In other words, dissection. Dr. Pierre Finck, the autopsy's assisting forensic pathologist, claimed the wounds in the neck were not dissected. However, the examination was already in progress when Finck arrived ([Shaw trial testimony, 2/24-25/1969](<http://www.aarclibrary.org/publib/jfk/garr/trial/pdf/Feb24.pdf>) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/finckshaw.htm>)]). When assisting pathologist Dr. J. Thornton Boswell gave his deposition to the Assassination Record Review Board, he was asked "*Were the organs of the neck dissected?*", to which replied "*Yes*" without explanation ([ARRB, 2/26/1996]([https://www.history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Boswell\\_2-26-96.pdf](https://www.history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Boswell_2-26-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/boswella.htm>)]).

Researcher Harrison Livingstone asked three other autopsy witnesses about the possibility of the throat wound being sewn shut - Paul O'Connor, Jan Gail "Nick" Rudnicki, and Jerrol Custer. As summarized in Livingstone's 1993 book *Killing The Truth: Deceit and Deception in the JFK Case*:

[Appendix J, *Encyclopedia of Medical Events And Witness Testimony* by Harrison E. Livingstone and Katlee Link Fitzgerald]

#### >SUTURES TO THE THROAT

[...]

>O'Connor said that there might have been but that he did not remember any sutures in the throat. (Letter from O'Connor to Livingstone, 6-11-91)

>Rudnicki said there were no sutures. (a: Oct. 14, 1990)

>Custer said there were no sutures. (a: Oct. 29, 1990)

Researcher Roger Feinman also said, in [chapter 5 of his 1993 manuscript *Between the Signal and the Noise*]([https://web.archive.org/web/20030517171505/http://kenrahn.com/JFK/the\\_critics/Feinman/Between\\_the\\_signal/Chapter\\_five.html](https://web.archive.org/web/20030517171505/http://kenrahn.com/JFK/the_critics/Feinman/Between_the_signal/Chapter_five.html)), "*O'Connor confirmed to me that he did not remember any sutures to the throat wound when the body arrived*".

When Ebersole talked to researcher David Mantik on 12/2/1992, he conceded that the throat was not sutured as he previously said. Ebersole still maintained that he was present when the pathologists were informed about the information from Dallas.

>Mantik: Interesting. You saw the tracheostomy, too, didn't you?

>Ebersole: (pause) I saw, yeah.

>Mantik: What did that actually look like? There seem to be some differing opinions on that.

>Ebersole: Well, it looked like an explosive (sic) type of wound, with lipping, ah, but clean, you know, we assumed that it was a surgical wound.

>Mantik: Looked like a scalpel incision?

>Ebersole: Yeah.

>Mantik: Uh-huh. Was it the size you would expect for a tracheostomy?

>Ebersole: Yeah, except it was, you know, too transverse. I wouldn't want to do a tracheotomy like that (said with some feeling).

>Mantik: Um-hmm. OK, that's an interesting comment. Was it open when you first saw it, or was it sutured?

>Ebersole: It was open.

>Mantik: It was open, not sutured. Uh-hmm. OK. Fascinating...

[...]

>Ebersole: And it was, oh, 10:30 at night before we got the communication from Dallas [Mantik note: Ebersole had told me during our first conversation that they had learned about the throat wound from Dallas that night. In prior conversations, he had also stated that he had learned of the projectile wound to the throat during the autopsy--that, in fact, he had stopped taking X-rays after that intelligence had arrived, because the mystery of the exit wound--corresponding to the back entrance wound--was solved.]

(Transcript from [*\*Murder in Dealey Plaza: What We Know Now that We Didn't Know Then about the Death of JFK\**, 2000, edited by James H. Fetzer, Appendix E]

([https://web.archive.org/web/20180405022225/http://krusch.com/books/kennedy/Murder\\_In\\_Dealey\\_Plaza.pdf](https://web.archive.org/web/20180405022225/http://krusch.com/books/kennedy/Murder_In_Dealey_Plaza.pdf)) [[audio]

([https://www.maryferrell.org/wiki/images/5/5d/ARRB\\_Ebersole-Mantik.mp3](https://www.maryferrell.org/wiki/images/5/5d/ARRB_Ebersole-Mantik.mp3))]

### **\*\*William Manchester, The Death of a President\*\***

William Manchester's 1967 book *\*The Death of a President\** is written as a narrative describing the events between 11/20-11/25/1963. Some portions follow the handling of the body and the actions of the Gawler's funeral staff. The book's version of events is partially based on the author's interviews with several autopsy witnesses, including Dr. George Burkley, William Greer, Roy Kellerman, Joseph Hagan, and Joseph Gawler. [Manchester's files including interview transcripts are currently stored at Wesleyan University in Middletown, Connecticut](<https://www.wesleyan.edu/libr/schome/Fas/ma1000-169.xml>), and these have not been digitized yet. Some of these files are marked to remain unavailable to the public until 2067 – 100 years after the publication of *\*The Death of a President\**.

[Book Two: *\*Castle\**, Seven: *\*LACE\**]

>[...] The autopsy team had finished its work, a grueling, three-hour task, interrupted by the arrival of a fragment of skull which had been retrieved on Elm Street and flown east by federal agents. The nature of the two wounds and the presence of metal fragments in the President's head had been verified; the metal from Oswald's bullet was turned over to the FBI. Bethesda's physicians anticipated that their findings would later be subjected to the most searching scrutiny. They had heard reports of Mac Perry's medical briefing for the press, and to their dismay they had discovered that all evidence of what was being called an entrance wound in the throat had been removed by Perry's tracheostomy. Unlike the physicians at Parkland, they had turned the President over and seen the smaller hole in the back of his neck. They were positive that Perry had seen an exit wound. The deleterious effects of confusion were already evident. Commander James J. Humes, Bethesda's chief of pathology, telephoned Perry in Dallas shortly after midnight, and clinical photographs were taken to satisfy all the Texas doctors who had been in Trauma Room No. 1.

The three autopsy pathologists always denied being aware of the information from Dr. Perry's afternoon press conference while they were in the morgue. The book also described Humes calling Perry "*shortly after midnight*", even though none of the pathologists admitted to contacting Parkland at this time. Humes told the House Select Committee on Assassinations that this phone call took place "*11 in the morning, perhaps 10:30, something like that*" ([HSCA Vol. 7, p. 243, 9/16/1977 HSCA interview with Humes and Boswell]([https://www.history-matters.com/archive/jfk/hsca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59Ia\\_HumesBosw.pdf](https://www.history-matters.com/archive/jfk/hsca/reportvols/vol7/pdf/HSCA_Vol7_M59Ia_HumesBosw.pdf))) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7f.htm>)] [[audio] ([https://history-matters.com/archive/jfk/hsca/med\\_testimony/audio/HSCA\\_HumesBoswell.htm](https://history-matters.com/archive/jfk/hsca/med_testimony/audio/HSCA_HumesBoswell.htm)))], and told the ARRB it happened "*...8 or 9 o'clock on Saturday morning*" ([Humes' ARRB deposition, 2/13/1996]([https://www.history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Humes\\_2-13-96.pdf](https://www.history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Humes_2-13-96.pdf))) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humesa.htm>))].

### **\*\*Robert Karnei\*\***

Dr. Robert Karnei was an employee at Bethesda Naval Hospital who claimed to have witnessed the autopsy. Dr. Karnei was not listed as present in the 11/26/1963 report by FBI Agents Sibert and O'Neill ([WC D 7, p. 280](<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>)), nor was he acknowledged in the Medical Panel Report from the House Select Committee on Assassinations ([HSCA Vol. 7, p. 8] ([https://history-matters.com/archive/jfk/hsca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M2\\_Autopsy.pdf](https://history-matters.com/archive/jfk/hsca/reportvols/vol7/pdf/HSCA_Vol7_M2_Autopsy.pdf))) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7a.htm>))].

Karnei was interviewed by the HSCA on 8/23/1977. The report on this interview reads:

>Dr. Karnei was interviewed because of his participation in the autopsy of President Kennedy [...]

[...]

>Dr. Karnei said the wound of the throat "...looked like a tracheotomy ellipse" but said there was no discussion of that fact. He said he thought it was assumed. He said he recalled no talk about there being

a wound of entrance in the front of the neck. He gathered from his conversation with Dr. Boswell that the doctors didn't come to a "...full conclusion..." that night.

([ARRB MD 61]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md61.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md61.pdf)))

In this instance, Karnei said he did NOT remember hearing the pathologists discuss a bullet passage in the throat. However, when Karnei was [interviewed by researcher Harrison Livingstone on 8/27/1991] (<https://archive.org/stream/nsia-LivingstoneHarrisonEdward/nsia-LivingstoneHarrisonEdward/Livingstone%20Harrison%20Edward%20132#mode/2up>), he apparently said the opposite - that he DID remember the pathologists making contact with Dallas that night:

>[...] "I think the report says it, but it was only an assumption. They hadn't even seen, they did not even know that there was a bullet hole in the throat."

>"At first, yeah, but there was a bullet hole in the neck. They couldn't find the exit wound."

>"They didn't know there was a bullet hole in the throat. All they saw was the trach incision."

>"Right. Once they talked to the doctors in Dallas, this is around midnight, I think."

>"No, it was the next day when he called Perry."

>"Next day?"

>"Yes. The body was already gone."

>"I was convinced they talked to somebody that night, and finally decided that they had to be an exit wound. Pierre Finck, I think, talked to somebody."

>"No, the only person that called was Humes. While you were there, there were people in the gallery that were trying to force the issue and say 'did the bullet come out of thr throat?' But at the time there was no knowledge that there was a bullet hole of any kind in the throat."

>"For some reason I thought they had discovered that around midnight. Maybe it was the next day."

>"Yes, it was the next day when Humes was sitting at home and called Perry."

([\**High Treason 2*\* by Harrison Livingstone, 1992, Chapter 7. \*Dr. Robert Frederick Karnei\*] (<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/L%20Disk/Livingstone%20Harrison%20Edward/Item%20083.pdf>))

Livingstone may have been inadvertently leading the witness here.

When Karnei spoke to the Assassination Records Review Board on 5/12/1996, he reverted back to his original position. As reported:

>Autopsy Conclusions: Dr. Karnei said that "about midnight" the prosecutors still had not found a bullet track through the body, nor had they found an exit wound for the entry in the shoulder, and had only a bruise atop the right lung as further evidence of damage -- he did not observe the bruise, but seemed to remember them discussing it. He said that Humes had concluded that two shots had hit the President from the rear. He told the ARRB staff that he was aware of hearsay that Dr. Humes had called Dallas to talk to a surgeon later in the evening before the body left the morgue, and had then learned that the tracheotomy had been made through a bullet wound in the front of the neck, thus causing Humes to conclude that the tracheotomy had obscured an exit wound. However, he could not remember who told him this, or when.

([ARRB MD 178]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md178.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md178.pdf)); [full tape of interview stored at the National Archives II building in College Park, Maryland] (<https://www.archives.gov/research/jfk/review-board/series-04.html>))

### **\*\*Reevaluating Sibert and O'Neill\*\***

To summarize:

While Kennedy's body was being examined at Bethesda Naval Hospital, the autopsy pathologists had trouble explaining why they couldn't find a bullet in the body to account for the wound in the back. They tried probing the back wound, which only revealed a path in the tissues less than the length of a finger. They theorized that a bullet lodged in the back and subsequently fell out through its point of entry. Two FBI Agents attending the autopsy, James Sibert and Francis X. O'Neill, were tasked with recording information and retrieving physical evidence. The agents' reports failed to acknowledge a bullet wound in the throat which had been obscured by a tracheotomy incision ([WC D 7, p. 280, 11/26/1963 FBI report](<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>)).

At some later point, the pathologists settled on the conclusion that a bullet entered the back and exited the site of the tracheotomy. Between this unknown period of time, lead pathologist Dr. James Humes telephoned Parkland Hospital's Dr. Malcolm Perry, who confirmed to him that a small bullet wound was seen in the throat before the incision was made ([WC D 77, autopsy protocol] (<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=3&tab=page>) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>)]). There is a question of whether this contact took place during or after the autopsy. In Humes' handwritten notes ([WC Vol. 17, p. 29] (<https://www.maryferrell.org/showDoc.html?docId=1134#relPageId=55&tab=page>)), the autopsy protocol ([WC D 77](<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=3&tab=page>) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>)]), and Humes' 3/16/1963 testimony to the Warren Commission ([WC Vol. 2, p. 347]([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [[text]

(<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>)), the call was said to have taken place on "Saturday morning" 11/23/1963. Technically, this could mean any time between 12:00 – 11:59 AM. The examination may have lasted past midnight, and the pathologists remained in the morgue until the body was prepared for burial by around 3:30-4:00 AM. When Humes was interviewed on 9/16/1977 by the House Select Committee on Assassinations, he said that he remembered the call taking place "*\*11 in the morning, perhaps 10:30, something like that\**", only after he had time to go home, attend a religious function with his family, then return back to Bethesda Hospital ([HSCA Vol. 7, p. 243] ([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59Ia\\_HumesBosw.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M59Ia_HumesBosw.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7f.htm>)] [[audio]([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_HumesBoswell.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_HumesBoswell.htm)))]. When Humes appeared in the Journal of the American Medical Association, the article said the call happened at 7:30 AM ([JAMA, 5/27/1992, *\*JFK's death - the plain truth from the MDs who did the autopsy\**] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md22.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md22.pdf)) [[text](<http://the-puzzle-palace.com/jama.htm>))]. When Humes gave his deposition to the Assassination Records Review Board on 2/13/1996, he said he thought the call happened "...*\*8 or 9 o'clock on Saturday morning\**" ([ARRB, 2/13/1996]([https://www.history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Humes\\_2-13-96.pdf](https://www.history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Humes_2-13-96.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/humesa.htm>))]. In contrast, Dr. Perry told the Warren Commission that he remembered being called by Humes TWICE, and thought he was called on Friday night 11/22/1963 ([WC Vol. 6, p. 7, 3/25/1964 testimony] ([https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6\\_Perry.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh6/pdf/WH6_Perry.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/perry\\_m2.htm](http://mcadams.posc.mu.edu/russ/testimony/perry_m2.htm))]; [WC Vol. 3, p. 366, 3/30/1964 testimony]([https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3\\_Perry.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh3/pdf/WH3_Perry.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/perry\\_m1.htm](http://mcadams.posc.mu.edu/russ/testimony/perry_m1.htm)))]. Perry's colleague, Dr. Paul Peters, similarly claimed to remember information from the autopsy leaking among themselves on the same day ([Interview by Ben Bradlee, 5/1/1981] ([http://www.kenrahn.com/Marsh/Jfk-conspiracy/PETERS\\_P.TXT](http://www.kenrahn.com/Marsh/Jfk-conspiracy/PETERS_P.TXT))). Autopsy photographer John Stringer said he remembered the pathologists contacting Dallas and learning of the throat wound while they were still in the morgue ([ARRB MD 19, HSCA report on a 8/17/1977 interview with Stringer] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md19.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md19.pdf)) [[text] (<http://www.kenrahn.com/Marsh/Autopsy/2070.TXT>)]; [ARRB MD 227, report on the ARRB's 4/8/1996 interview with Stringer]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md227.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md227.pdf)); [Stringer's ARRB deposition, 7/16/1996] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Stringer\\_7-16-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Stringer_7-16-96.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/stringer.htm>)] [[audio] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/audio/ARRB\\_Stringer.htm](https://history-matters.com/archive/jfk/arrb/medical_testimony/audio/ARRB_Stringer.htm)))]. So did radiologist John Ebersole (Ebersole's 3/9/1978 interview by Gil Delaney, *\*Best Evidence: Disguise and Deception in the Assassination of John F. Kennedy\** by David S. Lifton, Chapter 23; [ARRB MD 60, Ebersole's HSCA testimony, 3/11/1978] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md60.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md60.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/ebersole.htm>)] [[audio]



([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_Ebersole.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_Ebersole.htm)); Ebersole's 12/2/1992 interview by David Mantik, [*\*Murder in Dealey Plaza: What We Know Now that We Didn't Know Then about the Death of JFK\**, edited by James H. Fetzer, Appendix E] ([https://web.archive.org/web/20180405022225/http://krusch.com/books/kennedy/Murder\\_In\\_Dealey\\_Plaza.pdf](https://web.archive.org/web/20180405022225/http://krusch.com/books/kennedy/Murder_In_Dealey_Plaza.pdf)) [[audio] ([https://www.maryferrell.org/wiki/images/5/5d/ARRB\\_Ebersole-Mantik.mp3](https://www.maryferrell.org/wiki/images/5/5d/ARRB_Ebersole-Mantik.mp3))]. Likewise, William Manchester wrote in his 1967 book *\*The Death of a President\**: "*\*Commander James J. Humes, Bethesda's chief of pathology, telephoned Perry in Dallas shortly after midnight, and clinical photographs were taken to satisfy all the Texas doctors who had been in Trauma Room No. 1\**".

Humes was never totally clear whether he considered a bullet passage in the throat prior to his phone call with Perry ([WC Vol. 2, p. 347, Humes WC testimony, 3/16/1964] ([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>)]); [HSCA Vol. 7, p. 243, 9/16/1977 HSCA interview with Humes and Boswell]([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59Ia\\_HumesBosw.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M59Ia_HumesBosw.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7f.htm>)] [[audio] ([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_HumesBoswell.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_HumesBoswell.htm))]; [HSCA Vol. 1, p. 323, Humes HSCA testimony, 9/7/1978] ([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol1/pdf/HSCA\\_Vol1\\_0907\\_7\\_Humes.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol1/pdf/HSCA_Vol1_0907_7_Humes.pdf)) [[text]([http://mcadams.posc.mu.edu/russ/m\\_j\\_russ/hscahme.htm](http://mcadams.posc.mu.edu/russ/m_j_russ/hscahme.htm))]]; [Humes ARRB deposition, 2/13/1996] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Humes\\_2-13-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Humes_2-13-96.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humesa.htm>)]. Autopsy assistant Dr. J. Thornton Boswell claimed they deduced this DURING the body examination, based on their observation of bruising on the right lung and pleural cavity ([Baltimore Sun, 11/25/1966, Richard H. Levine] (<https://archive.org/stream/nsia-AutopsyJFKBoswellJThornton/nsia-AutopsyJFKBoswellJThornton/Autopsy%20JFK%20JTB%2008#page/n0/mode/2up>) [[2nd print] (<https://www.maryferrell.org/showDoc.html?docId=62495#relPageId=17&tab=page>)]]; [ARRB MD 26, HSCA report on 8/17/1977 interview with Boswell] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md26.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md26.pdf)) [[text] (<http://www.kenrahn.com/Marsh/HSCA/BOSWELL.TXT>)]]; [Boswell's 3/30/1994 interview by Gary Aguilar](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/A%20Disk/Autopsy%20JFK%20Notes%20Press%20Clippings/Item%20033.pdf>) [[audio, partial] (<http://www.assassinationweb.com/audio1.htm>)]]; [Boswell's ARRB deposition, 2/13/1996] ([https://www.history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Humes\\_2-13-96.pdf](https://www.history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Humes_2-13-96.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humesa.htm>)]. Dr. Pierre Finck, the assisting forensic pathologist, claimed the defect in the throat was overlooked as a tracheotomy during their whole time in the morgue ([ARRB MD 28, *\*Reports From LtCol Finck to Gen. Blumberg (1/25/65 and 2/1/65)\**] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md28.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md28.pdf))]]; [Finck's Shaw trial

testimony, 2/24-2/25/1969)(<http://www.aarclibrary.org/publib/jfk/garr/trial/pdf/Feb24.pdf>) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/finckshaw.htm>)]; [ARRB MD 30, Finck's HSCA testimony, 3/11/1978]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md30.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md30.pdf)) [[text](<http://mcadams.posc.mu.edu/russ/testimony/finckhsca.htm>)] [[audio]([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_Finck\\_311.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_Finck_311.htm))]; [JAMA, 10/7/1992] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md23.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md23.pdf)). Finck's version of the story is the most suspect. Finck said he examined the defect in the throat and found no sign of a bullet passage, and yet the autopsy protocol and statements of Dr. Humes indicate that pre-mortem bruising was observed on the strap muscles beside the trachea, in addition to the bruising on the right lung and pleura ([WC D 77](<https://www.maryferrell.org/showDoc.html?docId=10479#relPageId=3&tab=page>)) [[text](<http://mcadams.posc.mu.edu/russ/jfkinfo/app9.htm>)]; [WC Vol. 2, p. 347, 3/16/1964 Humes WC testimony] ([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>)]]. Also, the [autopsy photographs] (<https://drive.google.com/open?id=1oBvb0A9Sqge-mJVUMxtv8bsemRTlh5Y>) (NSFW) show what may be a partial bullet hole in the skin around the trach incision, as noted in the 1968 Clark Panel report ([ARRB MD 59]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md59.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md59.pdf))) [[text](<http://www.jfklancer.com/ClarkPanel.html>)] and the HSCA Medical Panel Report ([HSCA Vol. 7, p. 93]([https://history-matters.com/archive/jfk/hasca/reportvols/vol7/html/HSCA\\_Vol7\\_0052a.htm](https://history-matters.com/archive/jfk/hasca/reportvols/vol7/html/HSCA_Vol7_0052a.htm))).

Numerous other witnesses indicated that a bullet passage in the throat was discussed on the night of the autopsy – including pallbearer George Barnum (Barnum's 11/29/1963 statement, 8/20/1979 interview by David S. Lifton, \*Best Evidence\*), Admiral/Dr. Calvin Galloway (Arlen Specter, report on 3/11/1964 interview [[page 1]([https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes\\_j\\_j\\_cdr/humes\\_j\\_j\\_cdr-0018.jpg](https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes_j_j_cdr/humes_j_j_cdr-0018.jpg))] [[page 2] ([https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes\\_j\\_j\\_cdr/humes\\_j\\_j\\_cdr-0019.jpg](https://catalog.archives.gov/OpaAPI/media/7460586/content/arcmedia/dc-metro/rg-272/605417-key-persons/humes_j_j_cdr/humes_j_j_cdr-0019.jpg))]; [HSCA 180-10079-0460, HSCA report on 3/17/1978 interview with Galloway](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/G%20Disk/Galloway%20Calvin%20B%20Admiral/Item%20001.pdf>) [[text] (<http://www.kenrahn.com/Marsh/Jfk-conspiracy/GALLOWAY.TXT>)], Jim Snyder/Robert Richter of CBS ([ARRB MD 16, 1/10/1967 CBS memo] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md16.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md16.pdf))), mortician Tom Robinson ([ARRB MD 63, HSCA interview, 1/12/1977] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md63.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md63.pdf))) [[text] (<http://www.kenrahn.com/Marsh/Jfk-conspiracy/ROBINSON.TXT>)] [[audio]([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_Robinson.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_Robinson.htm))]; [ARRB MD 180, ARRB report on 6/21/1996 interview]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md180.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md180.pdf))), Lieutenant Richard Lipsey (HSCA interview, 1/18/1978 [[transcript] (

[Lipsey.htm](#)]] [[audio]]([https://www.history-matters.com/archive/jfk/hsca/med\\_testimony/audio/HSCA\\_Lipsey.htm](https://www.history-matters.com/archive/jfk/hsca/med_testimony/audio/HSCA_Lipsey.htm))); [ARRB MD 87] ([https://history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md87.pdf](https://history-matters.com/archive/jfk/arrb/master_med_set/pdf/md87.pdf)) [[text] (<http://www.kenrahn.com/Marsh/Jfk-conspiracy/LIPSEY.TXT>)]], and laboratory technician James Jenkins (9/23/1979 interview by David S. Lifton, *\*Best Evidence\**; 4/6/1991 panel discussion [[Video] (<https://www.youtube.com/watch?v=QpmMa10KNHo>), 58:18]).

Neither FBI Agents, Sibert nor O'Neill, reported hearing any discussion of a bullet through the throat. But they would not have to be lying for their statements to make sense with the rest of the evidence. For instance, maybe the pathologists just didn't communicate with them enough. In the same room while the body was being examined, Sibert and O'Neill spent some time talking with Secret Service Agent Roy Kellerman, who sat in the front passenger seat of the Presidential Limousine. Sibert and O'Neill reported on Kellerman's claim that he literally heard Kennedy speaking after the first loud gunshot, exclaiming *"\*Get me to a hospital\*" or "\*My God, I've been hit\*" (WC D 7, p. 3, report on first interview with Kellerman)(<https://www.maryferrell.org/showDoc.html?docId=10408&relPageId=7&>); [WC D 7, p. 7, report on 11/27/1963 interview with Kellerman] (<https://www.maryferrell.org/showDoc.html?docId=10408&relPageId=11>); [ARRB MD 154, Specter report on 3/12/1964 interview with Sibert and O'Neill] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md154.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md154.pdf))). If Sibert and O'Neill believed Kellerman, their memories could have been affected by the realization that Kennedy couldn't have been able to speak in that moment if he had just been wounded in the throat.*

Dr. Boswell would question the reports from Sibert and O'Neill. As he was quoted in the *\*Baltimore Sun\**, *"\*Dr. Boswell said that, at the time, he paid no attention to the presence of the FBI agents but that he can only conclude that they either did not understand what later took place, or else left before the lung contusions were discovered\*" (Baltimore Sun\*, 11/25/1966, \*Pathologist Who Made Examination Defends Commission's Version; Says Pictures And Details Back Up Warren Report\* by Richard H. Levine)(<https://archive.org/stream/nsia-AutopsyJFKBoswellJThorton/nsia-AutopsyJFKBoswellJThorton/Autopsy%20JFK%20JTB%2008#page/n0/mode/2up>) [[2nd print] (<https://www.maryferrell.org/showDoc.html?docId=62495#relPageId=17&tab=page>))]. When interviewed on 10/2/1990 by Baltimore Police Officer Richard Waybright, Boswell said referring to the agents "...\*Well, they also misinterpreted a lot of things that they heard. They didn't know what they were listening to or talking about\*" (*\*High Treason 2\** by Harrison Livingstone, Chapter 8 [[draft] (<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/L%20Disk/Livingstone%20Harrison%20Edward/Item%20069.pdf>))]. When interviewed on 3/30/1994 by researcher Gary Aguilar, Boswell said "...\*Well, what happened was that -- eh -- and this has caused -- and in fact -- the Secret Service and FBI people were never taken out -- were never out of the, eh, morgue. They stayed there the entire time and the telephone was right by my shoulder and those guys stayed on the telephone all the time. And they were causing an awful lot of distraction\*..." ([[Transcript]*

(<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/A%20Disk/Autopsy%20JFK%20Notes%20Press%20Clippings/Item%200033.pdf>) [[audio, partial] (<http://www.assassinationweb.com/audio1.htm>)]]. Boswell also commented during his 2/26/1996 deposition to the ARRB:

>Q. Dr. Boswell, I'd like to show you a document that's been marked [Exhibit 44]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md44.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md44.pdf)), which, for the record, is a report prepared by FBI Special Agents O'Neill and Sibert, dated November 27, 1963. Agents O'Neill and Sibert were at Bethesda on the night of the autopsy.

>Dr. Boswell, I'd like to show you page 5, the paragraph beginning "On the basis of the latter two developments." Could you read that paragraph to yourself, please?

>[Pause.]

>BY MR. GUNN:

>Q. Dr. Boswell, have you had an opportunity to read that?

>A. Yes.

>Q. Do you know who Agents O'Neill and Sibert were?

>A. Yes.

>Q. Did you ever talk to them?

>A. No.

>Q. Do you see anything in the paragraph that you just read that you now understand to be incorrect?

>A. Yes.

>Q. What is it that you understand to be incorrect in that paragraph?

>A. Well, it's not totally incorrect. I'm sure he overheard us, while we were dissecting, making comments and discussion and so forth, and there was a time at which point we had seen the X-rays and were looking at the wounds and saw that there were no whole bullets left in the body. And one of the possibilities early in the investigation was that that bullet had gone in there and worked its way out or was still there or something. By X-ray it wasn't there, so it had to have gone someplace. And we had the bullet wound of entrance. We didn't yet have the bullet wound of exit. We had the tracheostomy wound in the front, but no other place. And so we were just contemplating whether that had gone in and had not come out until they had done some manipulation on him and that it might be on his stretcher or something.

>Well, they did find a bullet on the stretcher, but not that one.

>Q. So would it be fair to say that although Sibert and O'Neill's statement that the doctors believed that there may have been an entrance wound in the back and the bullet worked itself out during the course of treatment, that although that may have been speculation at one point during the autopsy, that was abandoned by the conclusion of the autopsy?

>A. True. That's true.

>Q. So this would be almost as if the agents were present at one point, they left the room, and that that was their conclusion based upon something that had occurred partway through the autopsy?

>A. Yes. They were reporting this stuff by telephone at the time we were talking.

>Q. Do you know to whom they were reporting it?

>A. I have no idea.

It is also possible that further developments took place shortly after both agents already left the morgue. Showing this possibility will be the main focus from this point on.

According to handwritten notes from the FBI Laboratory's Robert Frazier, Sibert and O'Neill delivered bullet fragments to the Lab by 1:45 AM 11/23/1963 ([Frazier, "*History of Evidence*"] (<http://www.jfkclancer.com/hunt/mystery/fig2.jpg>); [FBI Lab. # PC-78243](<https://www.history-matters.com/essays/frameup/FrazierSpeaks/Figure1.jpg>)). Frazier repeated the "*1:45 a.m.*" time in his 5/13/1964 testimony to the Warren Commission ([WC Vol. 5, p. 58]([https://www.history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5\\_Frazier.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5_Frazier.pdf)) [[text] (<http://jfkassassination.net/russ/testimony/frazr2.htm>))]. A 11/23/1963 memo relaying information from Sibert and O'Neill was timestamped 2:00 AM ([ARRB MD 149] (<https://www.maryferrell.org/showDoc.html?docId=680#relPageId=1&tab=page>)). [A search on Google maps](<https://www.google.com/maps/dir/Walter+Reed+National+Military+Medical+Center,+8901+Rockville+Pike,+Bethesda,+MD+20889/FBI+Laboratory,+Stafford,+VA+22556/@38.7670404,-77.4524981,10z/data=!3m1!4b1!4m14!4m13!1m5!1m1!1s0x89b7c944d8b133d7:0xd763020b69ea82b4!2m2!1d-77.0938727!2d39.0015809!1m5!1m1!1s0x89b6f10dee636e75:0x632b0b0087a040bd!2m2!1d-77.4523983!2d38.5274773!3e0>) shows that it takes about an hour or more to drive from Walter Reed National Military Medical Center in Bethesda, Maryland to the FBI Laboratory in Stafford County, Virginia. That's more than a 50 mile drive. Therefore, Sibert and O'Neill could not have stayed at Bethesda Hospital any later than around 12:30 AM.

Both Sibert and O'Neill claimed they waited until the autopsy was finished before leaving. But how sure can this be? This is how their 11/26/1963 FBI report described the closure of the body examination and the presence of the staff from Gawler's funeral home:

>Major General WEHLE, Commanding Officer of U. S. Military District, Washington, D.C., entered the autopsy room to ascertain from the Secret Service arrangements concerning the transportation of the President's body back to the White House. AMC CHESTER H. BOYERS, U. S. Navy, visited the autopsy room during the final stages of such to type receipts given by FBI and Secret Service for items obtained.

The [receipt officially corresponding with the recovered bullet fragments] (<https://www.maryferrell.org/showDoc.html?docId=333>) is dated 11/22/1963.

>At the termination of the autopsy, the following personnel from Gawler's Funeral Home entered the autopsy room to prepare the President's body for burial:

>JOHN VAN HAESEN

>EDWIN STROBLE

>THOMAS ROBINSON

>Mr. HAGEN

[...]

>Also during the latter stages of the autopsy, a piece of the skull measuring 10 x 6.5 centimeters was brought to Dr. HUMES who was instructed that this had been removed from the President's skull. Immediately this section of skull was X-Rayed, at which time it was determined by Dr. HUMES that one corner of this section revealed minute metal particles and inspection of this same area disclosed a chipping of the top portion of this piece, both of which indicated that this had been the point of exit of the bullet entering the skull region.

([WC D 7, p. 280](<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>))

According to a memo by the Warren Commission's assistant council Arlen Specter summarizing a 3/12/1964 interview with Sibert and O'Neill, both were asked "*\*What time did the autopsy end?\**", and they replied "*\*We do not recall\**", but answered "*\*Yes\**" when asked "*\*Could it have been between 12:00 midnight and 1:00 a.m.?\**". They were also asked "*\*What time did Agent Sibert call Agent Killian at the FBI Laboratory?\**", to which they responded "*\*Some time between 11:00 p. m., and 12:00 midnight\**" ([ARRB MD 153] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md153.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md153.pdf))).

By 1966, critics of the Warren Commission were questioning the medical evidence which was publicly available. The critics asked why the official autopsy protocol had a different set of conclusions than the report from Sibert and O'Neill. FBI spokesmen stated publicly that the report was "*\*based on the medical evidence at that time\**" (Washington Post, 5/29/1966), "*\*the FBI report was wrong when it said "there was no point of exit\*", "The FBI agents were not doctors, but were merely quoting doctors\**" ([Los Angeles Times, 5/30/1966](<https://www.newspapers.com/newspage/382384091/>)). The FBI monitored media coverage of the assassination, and individualized memos were created attempting

to refute any popular material that discussed conspiracy. Two conspiracy-oriented books, [*Inquest: The Warren Commission and the Establishment of Truth*] (<https://web.archive.org/web/20141206075917/http://www.krusch.com/books/kennedy/Inquest.pdf>) by Edward Epstein, and *Whitewash: The Report on the Warren Report* by Harold Weisberg, were covered in a 5/29/1966 Washington Post article by Richard Harwood. Harwood wrote "...*They have unearthed, for example, a five-volume report from the Federal Bureau of Investigation, dated Dec. 9, 1963, that contains a "finding" which - had it been true - would almost certainly have led to the conclusion that Oswald had an accomplice in the assassination. This "finding" which now appears to have been completely erroneous was the product of an impulsive report by FBI agents a few hours after the President was killed. Although it was apparently based on little more than hearsay, it found its way into the Dec. 9 document*" ([Washington Post, 5/29/1966] (<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/W%20Disk/Whitewash%20I%20Press/Item%2001.pdf>)). A 6/2/1966 memo by FBI Agent Rex I. Shroder, addressed to the Bureau's Assistant Director Alex Rosen, defended Sibert and O'Neill's performance:

>In connection with the "Washington Post" article on 5/29/1966 captioned "An Inquest: Skeptical Postscript to Warren Group's Report on Assassination," I talked to SA James W. Sibert, Hyattsville Resident Agency, today in order to determine the facts concerning statements set forth in this article.

[...]

>SA Sibert and SA Francis X. O'Neill, Jr. were the two agents who were present during the autopsy. SA Sibert stated today that all of the information set forth in their FD-302 dated 11/26/1963 concerning the autopsy was obtained from Commander James J. Humes, Chief Pathologist, Bethesda Naval Hospital. None of the information obtained was hearsay.

>SA Sibert also advises that either he or SA O'Neill were present at all times while the autopsy was being conducted. They were not, of course, present during subsequent consultations between the doctors, when the official autopsy report was submitted.

([ARRB MD 165]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md165.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md165.pdf)))

On the same day, Alex Rosen addressed a memo to Cartha "Deke" DeLoach, adviser to FBI director J. Edgar Hoover, reviewing this information and explaining how it could be reconciled with the official story:

[...]

>DETAILS

>An article appeared in "The Washington Post," on 5/29/66, Sunday Edition, under the byline of Richard Harwood, captioned "An Inquest: Skeptical Postscript to Warren Group's Report on Assassination." The article relates the President's Commission on the Assassination of President Kennedy Report is now under attack by scholars and writers who believe the Commission's findings are marred by conjecture and by inconsistencies which the Commission was unable to resolve.

>The article relates to grave doubts about the competence of the Commission's work which are raised in two new books on the assassination - "Whitewash" by Harold Weisberg and "Inquest" by Edward Epstein. The article revealed perhaps the greatest source of controversy and doubt over the integrity of

the report in the minds of Weisberg and Epstein, was the unpublished FBI document which was a five-volume report from the FBI dated 12/9/63, that contains "a finding" which would almost certainly have led to the conclusion that Oswald had an accomplice in the assassination.

>This report was located in the National Archives. The controversy arises in connection with the report that the bullet which wounded President Kennedy in the shoulder did not exit from his body and the supplemental report of the FBI on 1/13/64, indicated medical examination of the President's body indicated the bullet which entered the President's back had penetrated to a distance of less than a finger's length. Further, the article revealed that one of the bullets entered below the shoulder to the right of the spinal column at an angle of 45 to 60 degrees downward and that there was no point of exit and further the bullet was not in the body.

>It was contended this statement is in direct contradiction to the official autopsy report from the Bethesda Naval Hospital written the last week in November, 1963, which indicated that the bullet which struck the President in the lower neck passed through his body and came out his throat. The article infers that the discrepancy between the FBI report and the autopsy report is crucial for the Commission's conclusion that Oswald acted alone is right only if the autopsy report is right and wrong if the FBI report is right.

>The article continues, "If a bullet did not pass through President Kennedy's neck and cause Gov. Connolly's wounds, a second assassin must have been involved.

>"This is so because films of the assassination proved conclusively that Mr. Kennedy and Mr. Connolly were wounded within a period of one-half second, at the minimum, and less than two seconds at the maximum.

>"It was physically impossible for a sniper to fire two rounds in that flash of time from a bolt-action rifle of the type Oswald used. Thus, either Mr. Kennedy and Mr. Connolly were struck by the same bullet or two men fired two nearly simultaneous bullets."

>There are no discrepancies in the Bureau's reporting of this matter. Initially, a five-volume report relating to the assassination of President Kennedy was furnished to Chief Justice Warren on 12/9/63, followed by a supplemental report dated 1/13/64, These are the two reports which are purported to be in contention with the official autopsy report concerning President Kennedy.

>It is specifically pointed out the President's Commission on the Assassination of President Kennedy Report clearly states that "of principal importance was the five-volume report of the Federal Bureau of Investigation, submitted on December 9, 1963, which summarized the results of the investigation conducted by the Bureau immediately after the assassination."

>The newspaper article indicated that our December, 1963 report revealed the bullet that wounded President Kennedy in the shoulder did not exit from his body. This, in substance, is true. Our 12/9/63, report states "Immediately after President Kennedy and Governor Connolly were admitted to Parkland Memorial Hospital, a bullet was found on one of the stretchers (subsequently determined this bullet was found on Connolly's stretcher). Medical examination of the President's body revealed that one of the bullets had entered just below his shoulder to the right of the spinal column at an angle of 45 to 60 degrees downward, that there was no point of exit, and that the bullet was not in the body. An examination of this bullet by the FBI Laboratory determined that it had been fired from the rifle owned by Oswald."



>Our supplemental report dated 1/13/64, under "FBI Laboratory Examinations," concerned information relating to bullets used in the assassination of President Kennedy and the examination of the Presidents clothing concerning a small hole in the back of his coat and a slit appearing in the front of his shirt approximately 6 inches below the top of the collar and 2 inches to the right of the middle seam of the coat. Contained in this information was the comment "medical examination of the President's body had revealed that the bullet which entered his back had penetrated to a distance of less than a finger length."

>The confusion appears to exist around this comment as our examination of the President's clothing indicated an entrance wound in his back and an exit wound in his shirt which had the characteristic of an exit hole for a projectile.

>The initial findings of the doctors performing the autopsy of the President on 11/22/63, at the Bethesda Naval Hospital, were verbally made to two of our Agents who observed the autopsy. The doctors statement to our Agents appears in the report of SA Robert P. Gemberling dated 12/10/63, captioned "Lee Harvey Oswald, aka, " commencing on page 281 (105-82555, Section 12, Part II). It was reported the body of President Kennedy was X-rayed and photographed, which revealed a path of a missile which appeared to enter the back of the skull and the path of disintegrated fragments could be observed along the right side of the skull. During the latter stages of this autopsy Commander James J. Humes, Chief Pathologist, Bethesda Naval Hospital, who conducted the autopsy, located an opening which appeared to be a bullet hole, which was below the shoulders and two inches to the right of the middle line of the spinal column. This opening was probed by Dr. Humes with the finger, at which time it was determined the trajectory of the missile entering at this point had entered at a downward position of "45 to 60 degrees." Further probing determined that the distance traveled by this missile was a short distance, inasmuch as the end of the opening could be felt with the finger by Dr. Humes. No bullet could be located in the back or any other area of the body as determined by total X-rays and inspection revealing there was no point of exit and the medical personnel performing the autopsy were at a loss to explain why they could find no bullets.

>This information was telephonically furnished to the Bureau Laboratory, at which time a Laboratory Supervisor advised the Laboratory had received through Secret Service, information that a bullet had been found on a stretcher in the emergency room of the Parkland Hospital, Dallas, Texas. Immediately following the receipt of this information it was made available to Dr. Humes, who advised "that in his opinion this accounted for no bullet being located which had entered the back region and that since external cardiac massage had been performed at Parkland Hospital, it was entirely possible that through such movement the bullet had worked its way back out of the point of entry and had fallen on the stretcher."

>Also during the latter stages of the autopsy a small piece of skull was furnished to Dr. Humes, who determined one corner of the section revealed minute metal particles. An inspection of this same area disclosed a chipping of the top portion of this piece, both of which indicated that this had been the point of exit of the bullet entering the skull.

>On the basis of the developments. Dr. Humes at that time stated the pattern was clear that one bullet entered the President's back and had worked its way out during external cardiac massage and that a second high velocity bullet entered the rear of the skull and had fragmentized prior to exit through the top of the skull. He, therefore, attributed the death of the President to a gunshot wound in the head.

>It is to be pointed out that information relating to the official autopsy report of the President was not made public until the Commission's report was released on 9/24/64. In a memorandum Mr. Rosen to Mr. Belmont, 12/24/63, (62-109090-68) it is pointed out that the President's family indicated a strong desire to keep the autopsy report as confidential as possible. It was recommended and approved that the copy of the autopsy report be maintained in Bureau files but that no further dissemination of it be made at that time.

>The Commission specifically pointed out, when released, the autopsy examination further disclosed that the bullet after entering the President, passed between two large muscles. It bruised a portion of the right lung, ripped the windpipe (trachea) in its path through the President's neck. The surgeon concluded the wounds were caused by the bullet rather than the tracheotomy performed at Parkland Hospital. Further, doctors concluded the bullet exited from the front portion of the President's neck that had been cut away by the tracheotomy.

>Thereafter, when the conclusion was made the bullet passed through the President's neck, the doctors at Bethesda Naval Hospital rejected the theory the bullet lodged in the large muscle in the back of the President's neck and fell out through the point of entry when external heart massage was applied in the Parkland Hospital. The Commission clearly pointed out in the early stages of the autopsy the surgeons were unable to find a path into any large muscle in the back of the President's neck and at that time they did not know there had been a bullet hole in the front of the President's neck when he arrived at the Parkland Hospital because the tracheotomy insertion had completely eliminated that evidence.

>When the surgeons learned of the location of the bullet this led to the speculation it might have penetrated a short distance and then dropped out as a result of external heart massage. Their further exploration during the autopsy disproved this theory. Dr. Humes, who believed the tracheotomy had been performed, based on his later observations, on the morning of 11/23/63, telephoned Dr. Malcolm O. Perry in Dallas, Texas, who was one of the attending physicians at Parkland Hospital, and learned that his assumption was correct that Dr. Perry had used the missile wound in the President's neck as the point to make the incision; therefore confirming Dr. Humes conclusion that the bullet had exited from the front part of the President's neck.

>Based on these professional findings the President's Commission arrived at its conclusion. It is obviously evident that the assumptions made by Weisberg and Epstein are inconclusive and erroneous, as they have extracted only those findings from the President's Commission that would bolster their own theories and hypotheses which led to their conclusions.

>It is further pointed out that they have attributed results of investigation to the FBI as all- conclusive rather than the fact that we reported only that information which was furnished to us by authoritative physicians, which was for the specific use of Chief Justice Warren, members of the President's Commission and Attorney General Nicholas deB. Katzenbach, who at that time was the Deputy Attorney General.

>The article further alleges that the Agents attending the autopsy obtained their information based on hearsay and that the Agents left the autopsy before the doctors had completed their examination. Both statements are false. Our Agents obtained their information from the head pathologist and remained in the autopsy room until the physical examination was completed.

([ARRB MD 166]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md166.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md166.pdf)))

On 6/29/1966, Sibert and O'Neill themselves wrote a memo reaffirming some of these points:

>RAUPACH also questioned as to whether or not the measurements as set forth in FD 302s submitted by SAs SIBERT and O'NEILL had actually been measurements furnished by the Pathologists or had been represented conclusions reached by the Agents. He was informed that all figures set forth in such FD 302 had been obtained from the Pathologist Performing the autopsy.

>Later in the week a telephone call was received from the Bureau supervisor FLETCHER THOMPSON, who advised that he had additional questions pertaining to captioned matter and stated that he desired to know whether or not at least one agent was present in the autopsy room during the time that the autopsy was in progress and until it was completed. He was advised that such was the case and that if one agent was out of the room it was understood and followed that the other agent was present at all times and that at no time were both agents out of this room from the time that the autopsy began until it was terminated.

[...]

>ASAC McDERMOTT further inquired whether at any time both SA SIBERT or SA O'NEILL were out of the autopsy room. He was advised that at no time did SAs SIBERT and O'NEILL leave the autopsy room together. At all times during the course of the autopsy one of the agents was present.

[...]

>Mr. McDERMOTT further was advised that the agents assisted in carrying in the Presidential casket into the autopsy room and were present in attendance at all times until the autopsy was complete and the morticians were preparing the body for burial.

([ARRB MD 157]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md157.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md157.pdf)))

From a 7/1/1966 memo by Alex Rosen criticizing Edward Epstein's book [*\*Inquest: The Warren Commission and the Establishment of Truth\**]

(<https://web.archive.org/web/20141206075917/http://www.krusch.com/books/kennedy/Inquest.pdf>), as well as a piece by Epstein featured in the 7/12/1966 edition of *\*Look\** magazine:

[...]

>The article highlights Epstein's theory that two assassins were involved in the shooting of President Kennedy. Epstein bases this on the official U. S. Navy autopsy report which states that the bullet which entered President Kennedy's back exited from the front of his throat. Epstein cites two FBI reports available to him in the National Archives, one dated 12/9/63 and the other 1/13/64, which "contradict" the autopsy report by saying that the bullet entered Kennedy's back, did not exit from his body, and thus could not have struck Governor Connally. On this basis Epstein feels the time sequence of the shots fired would have precluded one bullet from hitting both the President and Connally, thus showing that a second assassin would have to be involved.

>AUTOPSY REPORT:

>The facts in this matter are that the Agents who attended the autopsy at the U. S. Naval Hospital, Bethesda, were advised by the examining physicians they could not locate an exit hole for the bullet entering the President's back. The doctors subsequently determined that the exit hole had been obliterated by a tracheotomy performed on the President by doctors at Parkland Hospital, Dallas. The information obtained from the autopsy physicians was furnished to the Bureau and thereafter set forth in our 2/9/63 report. This information was repeated in our 1/13/64 report, along with a statement to the effect that a bullet exit hole had been located in the shirt worn by the President. The autopsy report, as furnished orally to our Agents, was repeated in the 1/13/64 report in order to emphasize the apparent discrepancy between the oral autopsy report and our examination of the clothing without our making such a conclusion.

>In commenting on the matter of the autopsy report, Knebel states "Epstein may well be within scholarly bounds in doubting the conclusions of the autopsy physicians, but to leap to the assumption that the findings were later falsified to match a theory of the assassination that proved politically appealing is quite a leap for an academician."

([ARRB MD 167])([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md167.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md167.pdf))

From a 10/6/1966 FBI report covering the book *\*Rush to Judgment: A Critique of the Warren Commission's Inquiry into the Murders of President John F. Kennedy, Officer J.D. Tippit and Lee Harvey Oswald\** by Attorney Mark Lane:

>Lane again clouds the issue by Contending on Page 65, that if the FBI report of December 9, 1963, was accurate, the Commission's explanation of the throat wound in President Kennedy was inaccurate, as is the Commission's finding that a bullet entered the back of the President's neck. This report revealed "Medical examination of the President's body revealed that one of the bullets had entered just below his shoulder to the right of the spinal column at an angle of 46 to 60 degrees downward, that there was no point of exit, and that the bullet was not in the body."

>This statement was accurately reported. The report reflects that the information was orally furnished to Special Agents of the FBI who attended the autopsy performed on the President at the U. S. Naval Hospital, Bethesda, Maryland. Following the autopsy of the President the FBI received the President's clothing and an examination by the FBI Laboratory determined that a slit having the characteristics of an exit hole for a projectile was located in the front of the shirt worn by the President. This information was contained in a supplemental report prepared by the FBI, dated January 13, 1964.

>Commander James J. Humes, one of the physicians who performed the autopsy on President Kennedy, subsequent to the conclusion of the autopsy examination, concluded a bullet had passed through the President. He believed that a tracheotomy had been performed on the President at Dallas, Texas, which might have obliterated the exit wound. On the following morning, November 23, 1963, he telephonically contacted Dr. Malcolm O. Perry at Dallas, who verified there was a missile wound in the front of the President's neck and this wound had been used as the point to make the incision for the tracheotomy. [(Page 89 of the Commission Report)](<https://www.archives.gov/research/jfk/warren-commission-report/chapter-3.html#neck>)

>During the early stages of the autopsy the surgeons were unable to find a path into any large muscle in the back of the neck. When the surgeons learned that a whole bullet had been found on a stretcher at the Parkland Hospital, this led to the speculation that the bullet might have penetrated a short distance into the neck and dropped out onto the stretcher as the result of external heart massage. Further exploration

during the autopsy disproved that theory. The surgeons determined that the bullet had passed between two large strap muscles and bruised them without leaving any channel since the bullet merely passed between them. [(Page 88 of the Commission Report)](<https://www.archives.gov/research/jfk/warren-commission-report/chapter-3.html#neck>)

([FBI 62-109090-520, WC HQ File, Section 29])(<https://www.maryferrell.org/showDoc.html?docId=62241#relPageId=50&tab=page>)

A 10/7/1966 FBI memo targeted two articles published on 10/5/1966 – one in the [*Washington Evening Star*] by Richard Wilson titled "*Supplementary Kennedy Slaying Report Urged*"(<https://www.maryferrell.org/showDoc.html?docId=700#relPageId=3&tab=page>), and the other in the [*New York World Journal Tribune*] by Bob Considine titled "*Another Author Certain Oswald Had Accomplice*"(<https://www.maryferrell.org/showDoc.html?docId=700#relPageId=5&tab=page>). The memo reads:

>PURPOSE:

>To answer Director's inquiry and to set forth facts concerning newspaper articles referring to FBI reports reporting results of autopsy examination conducted on President's body. Data in FBI reports is accurately reported.

>BACKGROUND:

>Articles appeared in the "Washington Evening Star" and "New York World Journal Tribune" (Bob Considine) on 10-5-66, referring to FBI reports forth the findings of the examining physicians who conducted on President Kennedy's body. These articles refer to the President's Commission on 12-9-63, and 1-13-64. Information set out was orally furnished to the Agents by examining physicians on 11-22-63, and is accurately reported.

>With reference to the above, our reports of 12-9-63, and 1-13-64, accurately quoted the comments of the examining physicians at Bethesda Naval Hospital on the night of 11-22-63. the actual autopsy report is at variance; however, all facts pertaining to this matter were fully-given to the Warren Commission and this Commission was fully aware of all such facts. In this connection, our Laboratory report very clearly, accompanied by photographs, showed a slit in the shirt and a nick in the tie which could have been caused by a projectile. The reason that there was variation between the two above-mentioned FBI investigative reports and the Warren Commission report because the FBI was precluded from disclosing in its preliminary report to the Commission (because of the desires of the Kennedy family) any information concerning the actual autopsy report which, as a matter of fact, was subsequently furnished to the Commission by the Secret Service and used in the final report of the Warren Commission.

>The confusion comes about as a result of the examining physicians changing their original theory as furnished to our Agents on 11-22-63, that the bullet which entered the President's back did not exit from his body. The physicians subsequently concluded that this bullet did exit from the President's body, having passed between two large strap muscles without leaving any channel. The exit hole was obliterated by doctors who performed a tracheotomy on the President at Parkland Hospital, Dallas, Texas. The day after the autopsy examination was conducted, the examining physicians talked to doctors at Parkland Hospital and learned that they had utilized the exit hole as the point of incision for

their tracheotomy. This chain of events is clearly set forth beginning on Page 88 of the Commission Report.

([ARRB MD 169]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md169.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md169.pdf)))

On 10/13/1966, Sibert himself created another FBI memo:

>Mr. THOMPSON was again advised that the autopsy had definitely been terminated when the agents departed for the Laboratory and, in fact, the body had been turned over to members of the Gawler Funeral Home, who appeared following the completion of the autopsy.

>Furthermore, information set forth in the FD 302 of agents SIBERT and FRANCIS X. O'NEILL, JR. relating to autopsy findings as stated by Dr. HUME were based on the conclusions reached by Dr. HUME concerning locations of points of entry of bullets and Dr. HUME was not aware that a bullet had emerged through the neck at the point where the tracheotomy incision had been made at Parkland Hospital, Dallas, Texas.

([ARRB MD 158]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md158.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md158.pdf)))

From a 9/12/1966 FBI memo concerning Epstein's book *\*Inquest\** and its review in the 7/8/1966 issue of *\*Time\** Magazine:

>[...] Crehan stated Epstein's book points out a vast divergency between the Warren Report's account of the bullet's course and the description revealed in our reports on 12/9/1963, and supplemental report of 1/13/1964. Crehan mentioned "Time" magazine apparently resolved the puzzle, as on page E3 of the 7/8/66, issue of "Time" he quoted the comment "the FBI has long since acknowledged that it was in error on that point." He said he was unaware of this development and wanted to know: "1) Have you indeed disavowed your findings in the aforementioned report?" and "2) If so, when was this retraction made public? The name and date of an appropriate publication would suffice here."

>FACTS:

>Our Agents attended the autopsy performed on the President at the U.S. Naval Hospital, Bethesda. They were orally advised by the examining physicians that an exit hole for the bullet entering the President's body could not be located. This information orally obtained from the physicians performing the autopsy was furnished to the Bureau and, thereafter, set forth in our 12/9/63 report. Following the examination of the President's clothing in our Laboratory, it was determined that a slit having the characteristics of an exit hole for a projectile was located in the front of the shirt worn by the President. This information was contained in our supplemental report of 1/13/64. In addition, the autopsy report orally furnished to our Agents was repeated in our 1/13/64, report in order to emphasize the apparent discrepancies between the oral autopsy report and our examination of the clothing, without making such a conclusion. Subsequently, and according to the Commission's report on pages 88 and 89, commander Humes who conducted the autopsy concluded the bullet exited from the front portion of the President's neck that had been cut away by the tracheotomy. He confirmed this by consulting with Dr. Perry at Parkland Hospital in Dallas who said he had used the missile wound in the President's neck as the point of incision when the tracheotomy was performed.

>The article in "Time" magazine was critical of Epstein. The article mentioned Epstein referred to two unpublished FBI reports dated 12/9/63 and 1/13/64, "which cast doubt on the single bullet theory." The

article then revealed "Epstein ignores the fact that the FBI has long since acknowledged that it was in error on this point." The Crime Records Division has stated that such a statement has never been made at any time. It is also noted that no need has arisen to make any retraction as we accurately furnished all information received to the Commission.

>ACTION:

>The Commission's report clarifies the sequence of events surrounding the autopsy reports and is located in chapter three, pages 88 and 89. Information received by the Bureau was accurately reported to the President's Commission and we never made any retractions regarding investigative reports. Crehan is being so advised in a letter- which is attached for approval.

([FBI 62-109060-4209, JFK HQ File, Section 102](<https://www.maryferrell.org/showDoc.html?docId=62389#relPageId=55&tab=page>))

On 11/2/1966, researcher David Lifton telephoned Agent Sibert, requesting him to answer some of his questions. Sibert declined, adding only "*\*The record speaks for itself\**" (Lifton, *\*Best Evidence: Disguise and Deception in the Assassination of John F. Kennedy\**, 1980, Part III: *\*A Search For New Evidence\**, Chapter 10: *\*The Liebler Memorandum\**).

Lifton also wrote a letter to the FBI asking a series of questions, prompting Alex Rosen to create a 11/16/1966 memo affirming that the reports by Sibert and O'Neill were based on "*\*information orally furnished to them by the autopsy surgeons\**" ([ARRB MD 173] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md173.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md173.pdf))).

On 11/23/1966, J. Edgar Hoover himself responded to a journalist's letter which included similar talking points:

>The Warren Commission and its findings concerning the assassination of President Kennedy currently are being severely criticized. The conclusions of the Commission, especially its conclusion that Lee Harvey Oswald acted alone in the assassination, have been openly challenged.

>In support of their speculations, some of the critics allege, among other things, that there is a "conflict" between portions of two FBI reports and the official autopsy report regarding the wounds found in the President's body.

>While there is a difference in the information reported by the FBI and the information contained in the autopsy report concerning the wounds, there is no conflict. The FBI reports record oral statements made by autopsy physicians while the examination was being conducted and before all facts were known. The autopsy report records the final findings of the examination.

>Briefly, this is what happened. The autopsy was conducted at Bethesda Naval Hospital on the evening of November 22, 1963. Two FBI Agents were present. They reported that chief autopsy surgeon, located what appeared to be a bullet hole in the back below the shoulder and probed it to the end of the opening with a finger. The examining physicians were unable to explain why they could find no bullet or point of exit.

>Unknown to the Agents, the physicians eventually were able to trace the path of the bullet through the body. On the morning of November 23, 1963, contacted doctors who treated the President at Parkland

Hospital in Dallas, Texas, the previous day and confirmed his assumption that a tracheotomy had been performed using a bullet hole in the front of the neck as the point of incision.

>The information reported by the Agents present during the autopsy was summarized on page 18 of the FBI report dated December 9, 1963. Meanwhile, the clothing worn by the President when he was shot was examined in the FBI Laboratory. This examination revealed a small hole in the back of his coat and shirt and a slit characteristic of an exit hole for a projectile in the front of the shirt one inch below the collar button. A nick on the left side of the tie knot, possibly caused by the same projectile which passed through the shirt, also was noted.

>These findings clearly indicated the examining physician's early observation that the bullet penetrated only a short distance into the President's back probably was in error. Since this observation had been included in the FBI report of December 9, 1963, another reference was made to it in the report of January 13, 1964, in conjunction with the Laboratory findings to point up this probability.

>The FBI and the Warren Commission each received a copy of the official autopsy report on December 23, 1963, from Secret Service following a specific request for this document. Since the FBI knew the Commission had a copy of the official autopsy, its contents were not repeated in an FBI report.

([FBI 62-109090-539, WC HQ File, Section 29](<https://www.maryferrell.org/showDoc.html?docId=62241#relPageId=126&tab=page>))

During 11/25-26/1966, various media outlets would reprint Hoover's statement that the reports from Sibert and O'Neill were based on "*oral statements made by autopsy physicians*" ([Associated Press, 11/25/1966, *Oswald Was By Himself Says Hoover*](<https://www.maryferrell.org/showDoc.html?docId=62398#relPageId=127&tab=page>); [Washington Star, 11/25/1966, *All facts show no accomplice, critics are told*, *FBI chief charges Warren Report is misinterpreted*] (<https://www.maryferrell.org/showDoc.html?docId=62249#relPageId=36&tab=page>) [[scan 2] (<https://www.maryferrell.org/showDoc.html?docId=62494#relPageId=57&tab=page>)]).

These documents show the FBI's motivation to vouch for Sibert and O'Neill's attentiveness during the autopsy of the President. The FBI had an incentive to defend themselves from an allegation rather than clarify the record.

Even the CIA had an opinion on this matter. The Agency's infamous [7/19/1968 memo "*Countering Criticism of the Warren Report*"](<https://npr.news.eulu.info/wp-content/uploads/2017/03/CIA-1967-Countering-Criticism-of-the-Warren-Report.pdf>), which helped popularize the terms "conspiracy theory" and "conspiracy theorist" (*Conspiracy Theory in America* by Lance deHaven-Smith), attached a [short writing titled "*The Theories of Mr. Epstein*"] (<https://the-eye.eu/public/concen.org/JFK%20Assassination%20Conspiracy%20The%20Jim%20Garrison%20Tapes%20audio%20videos%20e-books/books/CIA%20Memo%20Countering%20Criticism%20of%20the%20Warren%20Report%20OCR.pdf>):

>A recent critic of the Warren Commission Report, Edward Jay Epstein, has attracted widespread attention by contesting the Report's conclusion that, "although it is not necessary to any essential findings of the Commission," President Kennedy and Governor Connally were probably hit



successively by the same bullet, the second of three shots fired. In his book, *Inquest*, Epstein maintains (1) that if the two men were not hit by the same bullet, there must have been two assassins, and (2) that there is evidence which strongly suggests that the two men were not hit by the same bullet. He suggests that the Commission's conclusions must be viewed as "expressions of political truth," implying that they are not in fact true, but are only a sort of Pablum for the public.

[...]

>Epstein then argues that there is evidence which contradicts the possibility of a shooting by a single bullet. In his book he refers to Federal Bureau of Investigation reports stemming from FBI men present at the Bethesda autopsy on President Kennedy, according to which there was a wound in the back with no point of exit; this means that the bullet which entered Kennedy's back could not later have hit Connally. This information, Epstein notes, flatly contradicts the official autopsy report accepted by the Commission, according to which the bullet presumably entered Kennedy's body just below the neck and exited through the throat. Epstein also publishes photographs of the backs of Kennedy's shirt and coat, showing bullet holes about six inches below the top of the collar, as well as a rough sketch made at the time of the autopsy; these pictures suggest that the entrance wound in the back was too low to be linked to an exit wound in the throat. In his book, Epstein says that if the FBI statements are correct Q and he indicates his belief that they are Q then the "autopsy findings must have been changed after January 13 [January 13, 1964: the date of the last FBI report stating that the bullet penetrated Kennedy's back for less than a finger-length]." In short, he implies that the Commission warped and even forged evidence so as to conceal the fact of a conspiracy.

>Following the appearance of Epstein's *\*Inquest\**, it was pointed out that on the morning (November 23rd) after the Bethesda autopsy attended by FBI and Secret Service men, the autopsy doctors learned that a neck wound, obliterated by an emergency tracheostomy performed in Dallas, had been seen by the Dallas doctors. (The tracheostomy had been part of the effort to save Kennedy's life.) The FBI men who had only attended the autopsy on the evening of November 22 naturally did not know about this information from Dallas, which led the autopsy doctors to change their conclusions, finally signed by them on November 24. Also, the Treasury Department (which runs the Secret Service) reported that the autopsy report was only forwarded by the Secret Service to the FBI on December 23, 1963. But in a recent article in *\*Esquire\**, Epstein notes that the final FBI report was still issued after the Secret Service had sent the FBI the official autopsy, and he claims that the explanation that the FBI was uninformed "begs the question of how a wound below the shoulder became a wound in the back of the neck." He presses for making the autopsy pictures available, a step which the late President's brother has so far steadfastly resisted on the grounds of taste, though they have been made available to qualified official investigators.

>Let us consider Epstein's arguments in the light of information now available:

[...]

>*\*2. Epstein's thesis that either the FBI's reports (that the bullet entering the President's back did not exit) were wrong or the official autopsy report was falsified.\**

>a. Epstein prefers to believe that the FBI reports are accurate (otherwise, he says, "doubt is cast on the accuracy of the FBI's *\*entire\** investigation") and that the official autopsy report was falsified. Now, as noted above, it has emerged since *\*Inquest\** was written that the FBI witnesses to the autopsy did not know about the information of a throat wound, obtained from Dallas, and that the doctors' autopsy report was not forwarded to the FBI until December 23, 1963. True, this date preceded the date of the FBI's Supplemental Report, January 13, 1964, and that Supplemental Report did not refer to the doctors' report, following instead the version of the earlier FBI reports. But on November 25, 1966, FBI Director J. Edgar Hoover explained that when the FBI submitted its January 13 report, it knew that the Commission would weigh its evidence together with that of other agencies, and it was not incumbent on the FBI to argue the merits of its own version as opposed to that of the doctors. When writing reports for outside use, experienced officials are always cautious about criticizing or even discussing the products of other agencies. (If one is skeptical about this explanation, it would still be much easier to believe that the author(s) of the Supplemental Report had somehow overlooked or not received the autopsy report than to suppose that that report was falsified months after the event. Epstein thinks the Commission staff overlooked Mrs. Walther's report mentioned above, yet he does not consider the possibility that the doctors' autopsy report did not actually reach the desk of the individuals who prepared the Supplemental Report until after they had written Q perhaps well before January 13 Q the draft of page 2 of that report. Such an occurrence would by no means justify a general distrust of the FBI's "*\*entire\** investigation.")

[...]

>It is worth considering some of the implications of Epstein's accusation:

>a. The charge that the autopsy document was falsified incriminates at least a large number of government officials and independent lawyers, as well as three autopsy doctors. It would presumably involve the seven Commission members, who vary in political background and outlook, but share the attribute of having staked their reputations on the report. Is it really possible that such an awful secret, shared by so many, could be kept? A clerk who was witting of such a scandal could expect to sell his story for a figure running into at least six digits.

>It appears that, to put the matter at its lowest, Epstein has jumped to a conclusion on the basis of incomplete, inadequate research in a rush to judgement.

### **\*\*Sibert's timeline\*\***

Both of the autopsy's attending FBI Agents, James Sibert and Francis X. O'Neill, authored a 6/29/1966 memo claiming "...*\*at no time were both agents out of this room from the time that the autopsy began until it was terminated\**", "...*\*At all times during the course of the autopsy one of the agents was present\**", "...*\*the agents assisted in carrying in the Presidential casket into the autopsy room and were present in attendance at all times until the autopsy was complete and the morticians were preparing the body for burial\**" ([ARRB MD 157])

([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md157.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md157.pdf)). A 10/13/1966 memo from Sibert alone said "*\*the autopsy had definitely been terminated when the agents departed for the Laboratory and, in fact, the body had been turned over to members of the Gawler Funeral Home, who appeared following the completion of the autopsy\**" ([ARRB MD 158] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md158.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md158.pdf))). Let's see how both described this crucial point in time when they were interviewed separately, starting with Sibert.

From a report on Sibert's 8/25/1977 interview by the House Select Committee on Assassinations:

>Sibert said he left once during the autopsy to call the lab, because "... they were having trouble with locating bullets." Sibert said he called Chuck Killion at the FBI Lab and was told about the bullet found in Parkland. Sibert said he doesn't believe anyone called Parkland Hospital that night to find out what had happened there.

[...]

>[...] Sibert said that before they left the morgue they signed a receipt for the metal fragments.

([ARRB MD 85]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md85.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md85.pdf))  
[[text](<http://www.kenrahn.com/Marsh/Jfk-conspiracy/SIBERT.TXT>)])

From Sibert's 10/24/1978 affidavit to the HSCA:

>In reference to the head wound I was present when the piece of the missing bone from the skull was brought in during the course of the autopsy. This piece had reportedly been found in the limousine in which the President was riding. This piece of bone was X-Rayed and doctors determined it had evidence of metal particles. When the body was first observed on the autopsy table, it was thought by the doctors that surgery had possibly been performed in the head area and such was reflected in my notes at the time. However, this was determined not to be correct following detailed inspection and when the piece of bone found in the limousine was brought to the autopsy room during the latter stages of the autopsy.

[...]

>At the termination of the autopsy O'Neill and I took possession of small glass jar with a black metal top. This jar was received from Dr. Humes and contained two metal fragments that he had removed from the head. Both Agent O'Neill and I marked the top of the jar for identification. Prior to leaving for the FBI Laboratory, we signed a receipt for the metal fragments. [...]

([ARRB MD 46]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md46.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md46.pdf))  
[[text](<http://www.kenrahn.com/Marsh/Jfk-conspiracy/SIBERT.TXT>)])

The receipt associated with the recovered metal fragments is dated 11/22/1963:

<https://www.maryferrell.org/showDoc.html?docId=333>

Sibert further described the chain of events in his 9/11/1997 deposition to the Assassination Records Review Board:

>A: [...] I might mention- on this [Exhibit 157]

([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md157.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md157.pdf)) that when we were in that autopsy room. One of us was present all the time, with the exception of when photographs and radiology work and X-rays were done.

>Of course, you can see the reason for that. We didn't have lead jackets to wear, like a doctor does working in that environment. But, otherwise, one of us was always present.

>When I went out to make this call over to Killion. O'Neill was present. And I think we had a bite to eat. And one- ate, and the other one stayed. And, so, we were there at all times. So, that's- the only thing I'd add on that, 157.

[...]

>Q: Mr. Sibert, could you turn to the third page of the document that you have in front of you, [Exhibit No. 163]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md163.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md163.pdf)), and look at the portion that is down under Part 2B. Now, I will read that into the record while you're reading along with me.

>"While the casket was being removed-"

>Excuse me.

>"While the casket was being moved inside the hospital, Brigadier General McHugh relieved YN/2 Barnum, USCG, from the casket team, and awkwardly took his place.

>"After the President's body had been removed from the casket, a mahogany casket was exchanged for the original bronze one. This was necessary because the bronze casket had been scratched and marred from its being poorly handled. A handle on the side was also broken."

>A: I recall McHugh- General McHugh. I think that was President Kennedy's aide -Air Force aide, if I recall correctly. And he was listed as being there in the room during the autopsy. But I don't recall this switch, relieving this other bearer.

>And I don't recall this other casket being brought in right then, either. It was exchanged. They don't say any time there; it was soon exchanged or anything. But I don't know what time, well, that could have been exchanged when the people from Gawler Funeral Home came out.

[...]

>Q: What is your best recollection of the time that you left Bethesda on the night of November 23rd - 22nd/23rd?

>A: I would say it was sometime between 11:00 and midnight. That's about as near as I can place the time. My Bureau car was out at Andrews, and so was O'Neill's. We had to get transportation into D.C. And we had to hand-carry this down to the laboratory.

>Q: When you say "hand-carry this", you're referring to -

>A: The two fragments in this little jar. We turned those over to Bob Frazier down there at the lab.

>And then we had to have a clerk drive us out to Andrews Air Force Base from Bureau headquarters. And I got in at 4:00 o'clock there at my residence in New Carrollton, Maryland.

>So, that was the sequence. So, I would say it was between probably 11:00 and midnight that we left Bethesda.

>This receipt- I guess, you'll get into that "missile" later on.

>But this receipt, we signed it. And we assumed that for all practical purposes, the autopsy was over with, and the body would be turned over to the Gawler Funeral Home attendants that were there on the scene.

>We got their names. So, they had to be there.

>Q: What was taking place with the body at the time that you left? Were the autopsy surgeons still there? Had Gawler's started working on the body? What was happening?

>A: Well, the autopsy surgeons were still there. I mean, Boswell, Humes, and Finck. But, of course, we were interested in getting this evidence and getting it over to the lab.

>We knew they were fragments. Probably wouldn't be too valuable in identifying weapons - I mean, matching them with weapons.

>I don't recall much activity, because they were getting things together, Boswell had been making some drawings there. And Humes had his notes and material. And I think it was sort of a summation getting together, the receipt and that, and the photographs and the packs of film and X-rays.

>Q: But it was your impression that the autopsy had been completed?

>A: Yes.

>Q: And were people from Gawler's doing anything with the body at the time that you left?

>A: Not that I can recall. I don't recall them saying to wheel the body out or anything like that.

>If we had thought there was any more to go on in the way of an autopsy, why, O'Neill and I wouldn't have left. It wasn't necessary that we rush over to the lab. We figured that was the termination of the autopsy.

[...]

>Q: Okay. From the time that you first saw the body until the time that you left the morgue to return to headquarters and then to Andrews, approximately what percentage of the time were you with the body?

>Let's say, other than the time of the photographs and the X-rays, what percentage of the time were you actually with the body?

>A: Oh, we went out to eat one time, separately. But I'd say that I was with the body at all other times, with the exception of when we were excluded for autopsy- for the X-rays and photography, and when I made the phone call. I'd say 80 percent or better. More than that, because we - both of us, were there most of the time.

[...]

>Q: Do you remember- I'd like to show you a document that is marked [Exhibit 149] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md149.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md149.pdf)). And I will describe it while you're taking a look at it.

>A: All right.

>Q: And my question to you will be whether you have previously seen this document?

>It appears on its face to be a teletype, dated 11/23/1963, from SAC, Baltimore to Director and SAC, Dallas.

>Mr. Sibert do you recall having previously seen the document marked Exhibit 149?

>A: No, I've never seen this before.

>Q: Could you help me with understanding part of the document? What do you understand this document to be, at least in general? Not the specific content, but what kind of FBI document is it?

>A: Well, this was sent on Saturday, the 23rd, the day after the autopsy.

>Q: And this is - went on a teletype machine; is that right?

>A: Yes, the teletype out of our headquarters in Baltimore into - to Bureau headquarters in D.C.

>Q: Right - If you read along the top, where the teletype- It says "urgent". What does that signify?

>A: It's been so long, but -Top priority.

>I mean, it goes out immediately. It doesn't get stacked up in a pile of outgoing teletypes. There might also be administrative stuff going out, but this would be given priority treatment.

>Q: If you look just to the right of the 11/23/63, there's a 2-00. Do you know what that signifies?

>A: This applies to the hour of the day.

>Q: The next two, if you keep going across, there's an "AM TRC" Are you able to tell what those are?

>A: This would be 2:00 a.m. and the initials, TKC, of the sender in Baltimore.

>Q: Could you look at the end of the teletype, the next to last line, where it says, "2-07 AM. OK FBI WA JK." Are you able to tell me what any of that would signify?

>A: This would be the acknowledgement by FBI Headquarters in Washington, D.C. that the message had been received at 2:07 a.m. Furthermore, an O.K. was sent back by the Washington, D.C. teletype operator whose initials were furnished as JR.

>Q: Now, all of this would suggest, then, this document was probably crated somewhere around 2:00 a.m. on the morning of November 23rd?

>A: Yes.

>Q: So, again according to the times that we-

>A: I don't remember, thinking back again - As I say, I got in at 4:00 o'clock Saturday morning. I know I didn't get my boss out of bed at 2:00 a.m. in Baltimore, but - I'm trying to recall.

>I do know that that late Saturday morning I called Baltimore and my boss, and asked him if he wanted us to come in on Monday? Monday was a day of mourning, if you recall, and everything was shut down.

>I said, "Do you want us to come in and dictate this FD 302 Monday, and bring in a steno off of annual leave?"

>And so Tully, my boss said, "Well, let me think." "Jim," he said, "let me call headquarters."

>And he called over and later called me back and said, "No, get in the first thing Tuesday and dictate it."

>So, I don't know why this teletype would have been sent out at 2:00 a.m. on Saturday the 23rd. What they're getting there at the Bureau seems like a summation of what went on there at the autopsy. I mean, the metal fragments, back wound, and everything.

>And I can't recall- I didn't call from Bethesda. I don't think I called Baltimore. If I did it would have been from Bureau headquarters while there at that firearms lab.

>I may have called the night duty agent at Baltimore and gave him this information. And then he may have called somebody there who said, "Send a teletype." I don't know.

>Q: Let me read the first sentences to you of the second paragraph, and you can read along with me. I read this as saying:

>"Total body X-ray and autopsy revealed one bullet entered back of head and thereafter emerged through top of skull. Pieces of skull, measuring - excuse me. Piece of skull measuring 10 by 6.5

centimeters later flown in from Dallas hospital, and X-rays Bethesda disclosed minute metal fragments in this piece where bullet emerged from skull."

>Do you see those?

>A: Disclosed minute metal fragments. Going back to my 302, that probably comes back to here on page five, where it states:

>"This section of skull was X-rayed. At which time it was determined by Dr. Humes that one part of this section revealed minute medical - metal particles. And inspection of this same area disclosed a chipping of the top portion of this piece. Both of which indicated that this had been the point of exit, etc."

>Now, as I say, I don't understand. is FD 302 hadn't been dictated yet on the 23rd. That was dictated on the 26th, if you notice -

>Q. Yes

>A: -on the front page there. And as I explained the delay then, the day of mourning and that we had checked, did they want it dictated sooner? And they said no.

>Q: Now, I'm not aware- and I don't know the answer, but it would seem mostly like that either you or Special Agent O'Neill would be the source of this information to Baltimore. Do you have any understanding of who else, besides you or Mr. O'Neill, could have provided that information?

>A: No. It would have to emanate from the two Baltimore agents, O'Neill and myself, that were then at Bethesda.

>Q: Now, there's a reference in this teletype to the skull fragment coming in from the Dallas hospital. Do you reach any discussion at the time of the autopsy to this fragment coming from the Dallas hospital?

>A: Rather than the limousine that we were discussing? Well, I don't remember.

>Now, Secret Service Agent Kellerman was there and - who was the ranking Secret Service officer. He was the Assistant Agent in Charge of the White House detail.

>And maybe when it came in, it would have been given to him by one of his agents and something would have been said to him. But I don't even recall. He could have said something about this. But I don't recall such a statement.

>Q: I would like - Mr. Sibert, I'd like to show you a [document that we have marked MI 15, which is a page from the House Select Committee on Assassinations](<https://www.maryferrell.org/showDoc.html?docId=82#relPageId=131&tab=page>). And this document purports to show three pieces of skull fragment that arrived in the autopsy room at the night of the assassination. First, if you look at the larger piece that is somewhat triangular shaped, are you able to tell now whether that looks roughly similar to the piece that you saw? To the - to the fragment that came in from Dallas?



>A: I'm trying to think. But I don't recall Humes exhibiting that to us there at the autopsy, that larger piece. And my recollection is, that's the only piece that came in that night that I'm aware of.

Q: So, you don't remember seeing it during the autopsy yourself?

>A: I don't remember getting close up, or seeing it in Humes hand. Maybe I've got a bad memory, but I do recall receiving the measurements from Humes.

>Q: And you -Also, from what I understand you're saying, that you don't remember there being more than one fragment that arrived during the course of the autopsy?

>A: I only remember the one piece being mentioned.

>Q: Okay.

>A: This large piece.

>Q: Did Dr. Humes make any statement about where the fragment that arrived from Dallas should properly be placed in the head - from where did it come on the head?

>A: No.

>Q: Did you understand that he attempted to put that fragment back into the skull to identify where it came from?

>A: Only what I've read in [one of the issues of JAMA] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md22.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md22.pdf)), Journal of American Medical Association. When Humes, Finck and Boswell were interviewed by a doctor. I think it mentioned in the article that they stayed till 5:00 in the morning assisting the morticians in reconstruction of the head. If I remember correctly, this was done to prepare the body for the casket.

([ARRB, 9/11/1997]([https://www.history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Sibert\\_9-11-97.pdf](https://www.history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Sibert_9-11-97.pdf)))

Sibert was later interviewed by researcher William Law, as transcribed in Law's 2004 book [*In the Eye of History*]([https://www.krusch.com/books/kennedy/In\\_The\\_Eye\\_Of\\_History.pdf](https://www.krusch.com/books/kennedy/In_The_Eye_Of_History.pdf)):

[James W. Sibert & Francis X. O'Neill, Part 1]

[...]

>Sibert: [...] I'll tell you, we weren't thinking too much about—and another thing—now you know, it's interesting—have you ever read the interviews of Humes and Boswell by a doctor from Bethesda—[it was in JAMA, the Journal of the American Medical Association.' ^12]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md22.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md22.pdf))

>Law: I have read that.

>Sibert: Yeah. Now those two stayed there till about 5:30 in the morning as I recall. That was their admission—that they had stayed and helped the morticians. In other words, they must have taken some other pictures, too, because they showed me pictures at that deposition that were neat in appearance, and boy, I don't remember anything like that.

[...]

>Sibert: I had some other notations. I'll read them to you: *"\*See [ARRB exhibit 44] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md44.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md44.pdf)) 51/2—Bethesda surgeons considered the opening in the anterior neck as a tracheotomy and were not aware of it being made through a bullet wound until calling Parkland Hospital in Dallas the following morning, Saturday—\**" Now, that's verified. *"\*—at which time JFK's body was in the Gawler funeral home.\*"* in other words, the Bethesda autopsy physicians had turned it over to the funeral home. *"\*It is noted in a reprint of JAMA\*"*—Journal of the American Medical Association that I told you about, dated 5/27/92—you know, when the doctor interviewed Humes?—where Humes and Boswell were interviewed by JAMA editor George D. Lundburg MD, Humes stated that he and Boswell stayed at the medical center until 5:00 AM. Now, this is important, because we left there about midnight. And evidently they stayed to help. Helping to embalm and restore the president's head structure, I guess. (reading) *"\*Humes said he called Parkland at 7:30 AM.\*"* Now, that would be Saturday morning, they left at 5:00 AM, and he called Parkland and spoke with Dr. Malcolm Perry, *"\*learning of the tracheotomy made over a bullet wound.\*"* This is coming straight from Humes when he was interviewed for that JAMA article.

[James W. Sibert & Francis X. O'Neill, Part 2]

[...]

>Law: A couple of the autopsy technicians I talked to said they didn't use this kind of head-holder. They used a metal block with differing depths.

>Sibert: I didn't remember that type. I don't remember the detail. It could be that [picture] was taken after the morticians and staff were working there till early in the morning you know, that's because we didn't have access. They said they stayed there through midnight—after the autopsy was over and we had departed—until 5:00 AM, reconstructing the head with the morticians. Maybe they could have brought something at that time.

[...]

[James W. Sibert & Francis X. O'Neill, Part 3]

[...]

>Sibert: [...] During the autopsy they brought in a piece of bone that was about 3 1/2 inches in length and about 2 1/2 inches wide, I think. They said they found it in the presidential limousine down on the floor. They flew it in and Humes measured it and gave out the measurements. He said that death was due to the massive wound in the head.

>We signed a receipt. And here's another thing that in books were "missiles"—if you remember that word was used—but this receipt was made by the navy and we received it from them. A navy corpsman

typed it up and we signed it, but if I had typed up a receipt and composed it I would have just said metal fragments because there was no single bullet that we ever saw there that night at Bethesda.

>Law: So it was typed by the corpsman and he was the one who put-

>Sibert: Yeah, one of the corpsmen. Probably Humes or Boswell said type up a receipt for this little jar we had and we scratched our initials on the top of it, I think JWS. I was presented with it at the ARRB deposition there in College Park. We left there about midnight that night and, of course, our cars were out at Andrews because we had ridden in the motorcade. So we had to get transportation down to the Bureau—the firearms laboratory—and I turned this over to Bob Frazier, this little jar. Then we got a clerk to drive us from the laboratory out to Andrews Air Force Base where we picked up our Bureau cars. I got home about 4:30 that morning, and the phone started ringing about a half-hour later, from the Bureau and other places. I sent a teletype that night from the Bureau there, stating what the doctors had said and everything, and that the bullet was on the stretcher and all that [(photo 12)] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md149.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md149.pdf)).^1

[...]

>They said that they stayed until about five that morning—the funeral home directors—we had their names listed in our FD 302—to reconstruct the wound and everything and tidy up the hair because it was matted that night. You can imagine, the blood and everything, when you looked down in there into that cavity. I was probably as close as two foot—O'Neill and I. We were able to observe that wound. So they helped him reconstruct the body on the Saturday morning. Then, after that, they called Parkland and that's when they got hold of—I don't remember whether it was Perry or which doctor over there—but they said, "Well you know we made that tracheotomy over a bullet wound." This had never been considered that night. So you can see the predicament that the autopsy surgeons were in: the body is gone, the funeral home already had taken possession of it and they have another bullet wound that wasn't even considered. This is the beginning of the development of the single-bullet theory, because they had to account for that wound. So we never knew—O'Neill and I were never informed—we got calls from the Bureau, supervisors over there would maybe ask about the 302. They said, "Now you say surgery in the head area, was this your wording?" And we said, "No wait a minute, we're not doctors. This is what we copied down. Statements made by Humes or Boswell or Finck." And the measurements and everything we got from them and that kind of inquiry. But we never heard about a second autopsy report—two autopsy reports—other than ours. We got back and I called my boss, and I said, "Boss, when do you want O'Neill and I to come in and dictate on this?" This was Saturday morning. I said, "Do you want to call in a steno?" Because Monday, if you remember, was a day of mourning, everything was shut down. And he said, "Let me check with the Bureau." He called me back at home and said, "No, sir. Come in Tuesday morning first thing, that will be fine. We will dictate it then and the steno pool—all the girls—will be in. Our chief steno will take the dictation on this too, the head of the steno pool." So we went up Tuesday, and dictated our report.

[...]

>Conway: If you don't mind while we are right here: during your deposition they asked you about a memo that looked like it was written at two o'clock in the morning and you said that it wasn't you?

>Sibert: Oh, oh I know that. That was about the teletype.

>Conway: Right.

>Sibert: The teletype that I sent to the Bureau and to Dallas (photo 12). Let's see, have you got—?

>Conway: Because what I'm wondering is: could that have been a result of your call to Killion, could he have given that information out?

>Sibert: Let me see if I don't have that teletype. I think I do.

>Sibert: Here it is: 11/23/63 to the Director and SAC Dallas (photo 12).

>Conway: Okay, and who originated that?

>Sibert: I did.

>Conway: But didn't you tell the review board that you did not send something out in the middle of the night?

>Sibert: Let me see what—

>Conway: It's after you got called. He's asking you about what time you were home. What we need to get back to here is the sequence—since we went from Specter's discrepancies to your report, 302. So that if you wouldn't have written the 302—

>Sibert: This would be going back to leaving the Naval Medical Center with the little jar, and we went over there to Bob Frazier to the FBI firearms lab and there is where I had to dictate this. It was two o'clock in the morning.

>Conway: Okay, well we skipped that. So since I wasn't sure if you had written it and if you got it from Killion, which is what I supposed—let's talk about that.

>Sibert: All I got from Killion was this part here about let's see—"Noted that Secret Service Agent Richard Johnsen"—this all came from Killion who was from Dallas—"turned over to the lab one 6.5-mm rifle bullet approximately a 25- caliber copper-alloy full jacket, which he advised was found on a stretcher in the emergency room at Dallas hospital." So I never saw that at all. That came in, but I got it from Killion, because I'm over at Bethesda calling when the autopsy was being done—calling over to the FBI laboratory and Killion tells me that Johnsen is coming, bringing this bullet into the lab, you see, from Dallas.

>Conway: Okay.

>Sibert: Things were happening that night!

[...]

>Sibert: There was nothing mentioned that night, before midnight, about a bruise, because they said there was no exit—that back wound. When I came back and told them about the bullet on the stretcher, he jumped right on that and said the bullet went in a short distance and the cardiac manipulation on his back and also on his chest, it fell out on the stretcher. Now that was what we left there with that night. The rest of this stuff was all conspired, as I see it, after Saturday morning when they talked with

Parkland and realized that there was a bullet wound (in the anterior neck). He said that he realized—the way Humes talked in that one article there by JAMA—that in talking with them, it was easy to understand how that came through and didn't hit any bone and exited out through the throat, you know. Well, it was nothing like that at that time. That was all developed after we left.

[...]

>Law: For it to look that nice and neat, and the hair all in place, you think it would have to have been after some kind of reconstruction was done?

>Sibert: That was done after midnight. As I say, for all intents and purposes the autopsy itself was over at midnight.

Sibert didn't say he was explicitly told when the examination was over. He didn't recall the morticians beginning their work on the body, nor did he recall the arrival of the new Mahogany casket. In his words to the ARRB, "*we assumed that for all practical purposes, the autopsy was over with, and the body would be turned over to the Gawler Funeral Home attendants that were there on the scene\**", "...*we were interested in getting this evidence and getting it over to the lab\**". So, one could argue that the examination continued after both agents left. And during this uncertain window of time, the pathologists could have gained knowledge of the throat wound.

### **\*\*O'Neill's phantom timeline\*\***

FBI Agent James Sibert did not express certainty over whether he saw the end of the body examination. His fellow agent, Francis X. O'Neill, went much further with his version of the story. O'Neill claimed they stayed long enough to see the pathologists complete their work and allow the morticians to start preparing the body for burial.

From a report on O'Neill's 1/10/1978 interview by the House Select Committee on Assassinations:

>[...] O'Neill stated that a Navy man entered to make a receipt of the two fragments that were removed from the body. O'Neill emphatically stated that the doctors removed only two fragments and not "a missile". O'Neill said that someone then transported the two fragments to the FBI laboratory where they were then given to SA Kurt Frazier.

[...]

>O'Neill did not discuss any procedures with the embalmers. O'Neill last saw the body just prior to the dressing, before the morticians were through.

([ARRB MD 86]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md86.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md86.pdf))  
[[text](<http://www.kenrahn.com/Marsh/Jfk-conspiracy/O%27NEILL.TXT>)])

From O'Neill's 11/8/1978 affidavit to the HSCA:

>I was present when various persons placed the body on the autopsy table. Doctors then proceeded to remove the sheet covering JFK and to photograph the body. X-rays were also taken at this time. I remained right next to the body, a distance of less than two yards during the entire length of the actual autopsy except for a short period of time when I left to get a sandwich. Sibert, Greer and Kellerman were also present during the entire length of the autopsy.

>During the autopsy, I had lengthy conversations with Greer and Kellerman in which we discussed the entire circumstances of the assassination. When the autopsy doctor appeared to have no idea of where the bullet entering the back may have gone, the doctors began discussing other possible outlets for the bullet.

[...]

>When Humes and Boswell couldn't locate an outlet for the bullet that entered the back Sibert left to call SA Killion (FBI Laboratory) to determine if any extra bullets existed. He was advised of the finding of a bullet on a stretcher at Parkland Hospital in Dallas and relayed this information to the autopsy surgeons. I know for a fact that when the autopsy was complete, there was no doubt in anyone's mind in attendance at the autopsy that the bullet found to the stretcher in Dallas came out of JFK's body. I understand that Humes did call Parkland on 11/23/63 and learned at that time that a tracheotomy had been performed over a wound in the President's throat.

[...]

>The autopsy room had a phone and a coffee pot. During the autopsy an FBI agent and a Secret Service man were always present. I left once with Kellerman and Air Force General Godfrey McHugh, the Presidential Aide, to obtain a sandwich. Sometime during the autopsy O'Leary and Hill, both of the Secret Service, entered the room.

[...]

>I saw the doctors remove a piece of the missile from just behind an eye and another one from further back in the head. A Navy man entered the room to make a receipt for the two fragments that were removed from the body which Sibert and I signed for. The doctors removed only two fragments and not a full "missile". Sibert and I then transported the two fragments to the FBI Laboratory where they were then given to SA Kurt Frazier. The doctors obtained the large fragments; many small fragments were also in the head, but they were not removed. The autopsy doctors felt that the bullet that entered the head struck the center, low portion of the head and exited from the top, right side, towards the front.

>I do recall Humes, Boswell, and/or Finck calling out measurements for the wounds. I do remember the doctors measuring the piece of skull that was found in the limousine and brought to Bethesda during the autopsy.

[...]

>I did not discuss any autopsy procedures with the embalmers. I last saw the body just prior to the dressing, after the morticians were through.

([ARRB MD 47])([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md47.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md47.pdf))  
[[text](<http://www.kenrahn.com/Marsh/Jfk-conspiracy/O%27NEILL.TXT>)]]

On 5/20/1991, O'Neill spoke with researcher Harrison Livingstone. The [audio recording] (<https://drive.google.com/file/d/1DKT7rfKvXcQh133JeZf0IXsKfu7VG1hp/view>) is unintelligible in some places.

>Q: Yeah. And the hole in the back of the head, when-

>A: [...] say a hole in the back of the head, it was the whole massive right side of the head.

>Q: Right, the defect. The large defect.

>A: Tremendous.

>Q: Alright, when they drew the scalp back over that after filling the head with plaster, were you still there when they were putting-

>A: I was there until- in fact, we were there just when they put the body [...] White House.

>Q: Alright. When they reassembled the head, did you note- did you observe all of that procedure of pulling the scalp back over that large defect?

>A: Yeah. In fact, that was done prior to the time that the people came from the Gawler's funeral home.

>Q: Yeah. I have to warn you, there's going to be a major network documentary this fall, and the doctors and nurses from Dallas got together with some of the men from the autopsy, and they have all insisted both together and independently of each other that there was not enough scalp to cover that large defect in the back of the head.

>A: The- the- I don't know whether there was enough scalp [...] back of the head or not, I do know that [...] in a position so that when the gentlemen from the Gawler's funeral home came by, it was in excellent condition. As a matter of fact, when Jackie Kennedy came on down and saw the body, she was very- oh, how to say it- I don't want to say she was satisfied, but [...] opinion that the body could've been open-view [...] the body of a young, viable individual such as he being viewed would be too much of a catastrophic [...] the body could've been viewed [...]

>Q: Yeah. In other words, the face looked perfectly normal?

>A: Face looked perfectly normal, and when you put the person lying on the back you must assume automatically that if there's a large defect in the head and it's not covered, then it's not viewable.

>Q: Yeah.

>A: But this was totally viewable.

O'Neill was interviewed by researcher George Michael Evica, as shown in the 1992 video "*Questioning The Facts: Research Vs. Witness*". This tape has yet to be digitized and made publicly available, but the contents were summarized in Harrison Livingstone's 1993 book *Killing The Truth: Deceit and Deception in the JFK Case*: "*O'Neill stated that right before the end of the autopsy between 11:00 P.M.-12:00 A.M., General Wehle came in with the mahogany casket supplied by Gawlers*", and in [Vincent Palamara's 2015 book *JFK: From Parkland to Bethesda: The Ultimate Kennedy Assassination Compendium*](<https://books.google.com/books?id=cNwUCwAAQBAJ&pg=PT165&lpg=PT165&dq=%22george+michael+evica%22+%221992%22+parkland+to+bethesda&source=bl&ots=WpDMtrKa2R&sig=jBefh62ItuWB7UOnXctJ6u8EaZc&hl=en&sa=X&ved=2ahUKEwi04N7Z0MHfAhWjTt8KHaROBk0Q6AEwAXoECAgQAQ#v=onepage&q=%22george%20michael%20evica%22%20%221992%22%20parkland%20to%20bethesda&f=false>): "...*O'Neill added that, after the morticians worked on JFK, "He looked excellent. He looked like he was sleeping. The casket could have been opened...they fixed up the back [of the head] here*".

On 4/2/1992, O'Neill appeared on a [panel discussion at the Franklin Pierce Law Center] (<http://www.manuscriptservice.com/FXO/transcript.pdf>):

>[...] Then they completed the autopsy itself and at the very end he says, "Well now we know exactly what occurred. There was a bullet which was fired which went into the back and worked its way out. There was another bullet which was fired—we all know what happened to that and—" I don't what happened to that—I have a good conjecture what happened to that—"and the last bullet hit the president's head and wham, away she blows." A little bit later, during the autopsy, later stages of the autopsy, they bring in—"they" being the Secret Service bring in [two] of a skull, which was found in Dallas in the car. And it turns out that it could be matched perfectly with part of the missing, part of the missing skull in the head—and there's bevelling on that which coincides with the bevelling on the eh, the eh, on the back of the president's head here (Fig. 9).

>The morticians come in. They drain the body. They powder the body. They shave the body. They fixed it so that you would think he had eyes. They closed his eyes. They went ahead and, eh...prepared the body for burial. They had sent back to the White House to get the underwear to put on the president. There was nothing further done. Quite frankly there was nothing further that could be done, at that time, for the president. The autopsy was over. The autopsy was completed. [...]

From O'Neill's 9/12/1997 deposition to the Assassination Records Review Board:



>A: [...] - there was not the slightest doubt when we left there that the bullet found on the stretcher in Dallas was the bullet which worked its way out through external cardiac massage.

>And the doctor said, since the body had not been turned over in Dallas, "External cardiac massage was conducted on the President, and the bullet worked its way out." There was not the slightest doubt-not a scintilla of doubt whatsoever that this is what occurred.

>In fact, during the latter part of it and when the-when the examination was completed, the doctor says, "Well, that explains it." Because Jim had gone out, called the laboratory, learned about the bullet, came back in. We thought it might have been an ice bullet. We thought it might have been a wax bullet, a plastic bullet. There was no explanation of it.

>Because I was closer to the President's body than I am to you, and you're only about a foot and a half away or two feet away. And viewing them with the surgical probe and with their fingers, there was absolutely no point of exit; and they couldn't go any further. And that presented a problem- one heck of a problem. And that's why Jim went out and called. And now this was the exact thought when the entire autopsy is completed. The body has been dressed-washed, dressed, powdered, and is all set to go to the White House, and, in fact, left for the White House. [...]

[...]

>[...] In fact, I have read in the newspaper that he made some statement thereafter to the fact that, "After the autopsy was over," or something such as that, "they ran out of their office, and ran up to Baltimore to dictate something." Which was a lot of bull. It was not true. When the autopsy was completed, we had the bullets-or the fragments of the bullets which we had to take back to the laboratory, which we gave to a agent by the name of Frazier. We had to get back home. In fact, I didn't get home till about 7:00 o'clock that- 7:00 a.m. that morning. Jim and I got together-I believe it was on-oh, in the car going out to the-Andrews AFB- to discuss different things. I said, we'll get together-I think it was on Monday-up in Baltimore to discuss it. We dictated on Tuesday. I think it was the 26th we dictated, or something like that. Yeah, I think it was on the 26th we dictated it. [...]

[...]

>Q: Is it your understanding that you were present through the time that the autopsy was completed?

>A: Totally and absolutely.

>Q: What was the last thing that you saw done to the body by the autopsy doctors?

>A: Well, the body was turned back on over.

>Q: Onto the back, or from -

>A: From the back to the front. So, now we have the body lying there. Let's see. I'm trying to figure out who did the washing, and who did the- There was some washing to begin with. But I mean, the-totally at the end. The last thing I recall them doing, they is were taking off their gloves and calling in the morticians to complete the procedure which they have to perform on the body.

>Q: What was the condition of the skull at the time the doctors were completed? That is, were there flaps of skin down, or had that all been pulled back, too?

>A: As I recall it, there was-the flaps of skin had been put back. I do recall the people coming in later-the funeral home, fixing it up to the point where it looked like in good shape. I mean, it looked in good shape. But I don't recall the doctors doing anything further to the body, once they had turned it on over. I don't know whether they took their hand and-you know, you push the thing back in, such as this, which would cover up that massive hole-the long section of the hole, And there was no discussion whatsoever about the tracheotomy. I mean, it was a fait accompli that that was a tracheotomy, nothing else. Nor was there any further discussion about the wound at the back of the-the wound in the back. No discussion whatsoever about that-about what it might have been, or -

>Now, I understand that later that morning, after the body was gone, calling to Dallas, they found out that it was over a bullet wound. But by that time, the body was gone.

>Q: Did you see the men from Gawler's perform work on reconstruction of the body?

>A: Yes, I did.

>Q: Approximately what time, to the best of your recollection, did the autopsy itself conclude?

>A: Physically, the autopsy concluded somewhere shortly after midnight, I believe it was. In that general area. Now, I don't- can't be too much more specific. Maybe 12:15. Maybe 1:00 a.m. But it was over and done with. I know we did not get out- Well, let's reconstruct it a bit. The teletype was sent to the Bureau at 2:00 a.m., which means that we had to be out at The teletype was sent from- Let's me see. I'm trying to think where it was sent from originally. From the Bureau headquarters- I mean, from Washington-no, from Baltimore.

>Q: Baltimore.

>A: So, I would say that the-We called up immediately upon getting, I believe, back out to Andrews. Or maybe we called from the Bureau-called from the Bureau back to Baltimore to discuss it. So, it had to be that way, I would say that the autopsy was finished somewhere around 1:00, 1:10.

>Q: Did you go back- Something that you said confused me. Did you go back to Baltimore?

>A: No.

>Q: So, that was just a telephone call to Baltimore?

>A: That's correct. From Bureau headquarters.

>Q: And was the autopsy completed at the time you made the call to Baltimore?

>A: Totally. The body was dressed.

>Q: About how long were people from Gawler's working on the body, as best you can recall?

>A: Oh, let me see. They drained what was left the blood. I remember they put in whatever is substance-formaldehyde or something like that. I believe they took out the eyes, if I'm not mistaken. What happened to them, I wouldn't know. Let me see. They covered up the throat. I don't know what procedure they used, but they did that. They powdered the body. I'm sure of that. I know that. I know they shaved it also. Even put underwear on it. By the way, the valet went to the White House to get clothes for his body. A blue striped suit, dark tie. And that was the condition of the President-ex-President when we left. He was in a suit. He was in a casket. This was the second casket he was in, now, which was brought in by General Wehle.

>Q: During the time that work was being done on the skull-where there was the damage to the skull, did you watch that work being done?

>A: Just a very short procedure. From our point of view, the autopsy was totally over and completed. This was something which we put in there from a peripheral point of view. This was just here. These people came in. They did this, they did that, et cetera. But the autopsy was totally completed. The doctors were then-I think it was Humes was writing his protocol at the time. To my knowledge, he never-he never went back to the body while Jim and I were there.

>Q: So, from the time that the autopsy was completed and Gawler's started, were the- any of the autopsy doctors in the morgue or in the -

>A: Yes.

>Q: - the room? They were in the room?

>A: Yes, they were.

>Q: But they didn't go back and touch the body, or -

>A: When I say they were in the room, they were in the other room. Remember somebody was -

>Q: The anteroom?

>A: No, not the anteroom- They were in the- There was two- There was a partition back there, Net where the X-rays were. There was a table in there. And they were in there, discussing it-in that particular area there.

>Q: Okay. But they didn't go back with-or do anything further with the body?

>A: I never saw them. No, they- Because the people from the funeral home were working on it.

>Q: Okay. And at the time that you left the hospital, it was your understanding that the work on the body had been totally completed by Gawler's, and it was-the body was back in the casket?

>A: To my knowledge, the body was totally completed by then. In fact, they were waiting for Mrs. Kennedy and Bobby Kennedy to come down to view the body.

>Q: Did you see what the people from Gawler's used to reconstruct the head at all? Any procedures or -

>A: No, I don't recall that. I must have seen it at the time, but I was- You know, to me, from my general experience and from my investigative experience, the autopsy was totally completed. The doctors took off their gloves. They left them on the table. They walked into another room-I mean, another section of the room. To me, that's over and done with.

([ARRB 9/12/1997]([https://web.archive.org/web/20151228224836/http://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Oneill\\_9-12-97.pdf](https://web.archive.org/web/20151228224836/http://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Oneill_9-12-97.pdf)) [[audio] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/audio/ARRB\\_Oneill.htm](https://history-matters.com/archive/jfk/arrb/medical_testimony/audio/ARRB_Oneill.htm))])

From O'Neill's interview by researcher William Law:

>Law: The skull section brought from Dallas. Was that part of the back of the head?

>O'Neill: (chuckles) Where else would it be from?

>Law: Why I'm asking is: somebody interviewed Sam Kinney, one of the Secret Service agents who said that the piece of skull he saw was like a flower pot. It was basically the back of the head. And I'm wondering if that was the large section of skull that was brought in that night.

>O'Neill: There was a section that was brought in at that particular time. I did note that there was a section brought in at that time, but quite frankly, it came in during the later stages of the autopsy, and we were more concerned with the completion of the autopsy rather than looking at a piece of skull.

([Law, *\*In the Eye of History\**, 2004] ([https://www.krusch.com/books/kennedy/In\\_The\\_Eye\\_Of\\_History.pdf](https://www.krusch.com/books/kennedy/In_The_Eye_Of_History.pdf)))

From [O'Neill's 4/6/2005 interview by Brian R. Hollstein from the *\*Society of Former Special Agents of the FBI\**](<https://drive.google.com/open?id=19cjQnnZvQg7AFeTPpgc8qFjD1RI3Prta>):

>F: [...] When the autopsy was over totally, General Wehle, who was the General of the Military District of Washington, he wanted to come in and I told him, "No, you can't come in here. This is Bureau restricted." So he told me who he was and he said, "I understand the casket was broken down in Dallas" and it was. It was broken getting onto the plane down in Dallas.

>F: So he went out and brought in a second casket. Now this has a big hullabaloo that some individual that another body was switched. Utterly ridiculous; utterly ridiculous. The second casket was to replace the first casket that had been destroyed and Wheeler said, "We can't have a President of the United States being buried in a broken casket." It was quite a situation. We stayed there until they came, the individuals from the funeral home. And they washed, they shaved, they fixed up the President. They put on a nice blue serge suit, pin striped suit. He could have been exhibited, except Mrs. Kennedy did not want the body viewed because she thought it would be too much of a trauma on the people.

>F: And she even indicated at one time to one of the situations in one of the Arabic countries where they all filed past the coffin and tipped it over. She didn't want anything like that. She said it wouldn't be dignified. So as a result of that, the body was put in the ambulance and taken on out into the hall where it was viewed at the White House and then the public. And that's about it. Since that day, we left there about 2:30 a.m. to go back home... no, to go to Andrews to get our cars and from there we went on back to our homes.

Francis X. O'Neill is almost certainly not telling the truth. O'Neill could not have seen the restoration of Kennedy's body to the point where "*He looked excellent. He looked like he was sleeping*". Judging by the notes and testimony of the FBI Lab's Robert Frazier, Sibert and O'Neill delivered the bullet fragments to the Lab by 1:45 AM 11/23/1963 ([Frazier, "History of Evidence" (<http://www.jfklancer.com/hunt/mystery/fig2.jpg>); [FBI Lab # PC-78243](<https://www.history-matters.com/essays/frameup/FrazierSpeaks/Figure1.jpg>); [WC Vol. 5, p. 58]([https://www.history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5\\_Frazier.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh5/pdf/WH5_Frazier.pdf)) [[text] (<http://jfkassassination.net/russ/testimony/frazr2.htm>)]), and a teletype memo based on their information was timestamped 2:00 AM ([ARRB MD 149] ([https://history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md149.pdf](https://history-matters.com/archive/jfk/arrb/master_med_set/pdf/md149.pdf))). Meanwhile in the morgue, the restoration lasted until 3:30-4:00 AM, after which it was placed into its casket and transported to the White House ([ARRB 236, p. 5](<https://www.maryferrell.org/showDoc.html?docId=758#relPageId=5&tab=page>); [WC D 4, p. 80](<https://www.maryferrell.org/showDoc.html?docId=10404#relPageId=155&tab=page>); [WC Vol. 18, p. 745] (<https://www.maryferrell.org/showDoc.html?docId=1135#relPageId=759&tab=page>); [ARRB MD 163]([https://history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md163.pdf](https://history-matters.com/archive/jfk/arrb/master_med_set/pdf/md163.pdf)); [WC Vol. 2, p. 132] ([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Hill.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Hill.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/testimony/hill\\_c.htm](http://mcadams.posc.mu.edu/russ/testimony/hill_c.htm)); [WC Vol. 2, p. 61]([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Kellerman.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Kellerman.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/kellerman.htm>); [WC Vol. 2, p. 347]([https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://www.history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>)]).

Also note that, while O'Neill claimed that the autopsy pathologists left the room without participating any further, the pathologists themselves always said they stayed to observe and help the morticians prepare the body ([ARRB MD 19, p. 6, HSCA report on 8/10/1977 interview with Humes] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md19.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md19.pdf)) [[text] (<http://www.kenrahn.com/Marsh/Autopsy/2070.TXT>); [HSCA Vol. 7, p. 243, HSCA interview with Humes and Boswell, 9/16/1977]([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M591a\\_HumesBosw.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M591a_HumesBosw.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7f.htm>)] [[audio] ([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_HumesBoswell.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_HumesBoswell.htm))]; [ARRB MD 30, Finck's HSCA testimony, 3/11/1978] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md30.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md30.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/finckhsca.htm>)] [[audio] ([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_Finck\\_311.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_Finck_311.htm))]; [HSCA Vol. 1, p. 323, Humes' HSCA testimony, 9/7/1978] ([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol1/pdf/HSCA\\_Vol1\\_0907\\_7\\_Humes.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol1/pdf/HSCA_Vol1_0907_7_Humes.pdf)) [[text] ([http://mcadams.posc.mu.edu/russ/m\\_j\\_russ/hscahme.htm](http://mcadams.posc.mu.edu/russ/m_j_russ/hscahme.htm))]; [JAMA, 5/27/1992]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md22.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md22.pdf))

[[text](<http://the-puzzle-palace.com/jama.htm>)]; [Humes' ARRB Deposition, 2/13/1996] ([https://www.history-fmatters.com/archive/jfk/arrb/medical\\_testimony/pdf/Humes\\_2-13-96.pdf](https://www.history-fmatters.com/archive/jfk/arrb/medical_testimony/pdf/Humes_2-13-96.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humesa.htm>)]; [Boswell's ARRB Deposition, 2/26/1996] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Boswell\\_2-26-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Boswell_2-26-96.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/boswella.htm>)]; [Finck's ARRB Deposition, 5/24/1996] ([https://history-matters.com/archive/jfk/arrb/medical\\_testimony/pdf/Finck\\_5-24-96.pdf](https://history-matters.com/archive/jfk/arrb/medical_testimony/pdf/Finck_5-24-96.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/fincka.htm>))]. O'Neill's timeline is just not credible.

### **\*\*Timeline of the morticians\*\***

The 11/26/1963 report by FBI Agents James Sibert and Francis X. O'Neill listed the names of the morticians that arrived at the morgue in Bethesda Naval Hospital:

>At the termination of the autopsy, the following personnel from Gawler's Funeral Home entered the autopsy room to prepare the President's body for burial:

>JOHN VAN HAESSEN

>EDWIN STROBLE

>THOMAS ROBINSON

>Mr. HAGEN

([WC D 7, p. 280](<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>))

The restoration took place in the same room as the autopsy. This makes it difficult to place an exact time for the end of the body examination and the beginning of the restoration. A few contemporaneous notes and documents created by the Gawler's staff may help piece together a sequence of events.

From "*Gawler's Funeral Home "First Call Sheet" which records events of November 22-23, 1963*":

>Sent by Col. Miller Date 11/22/63 Time 4 25 P.M.

[...]

>Embalmer JOHN VAN HOESEN - ED STROBLE - TOM ROBINSON UNDER SUPERVISION - JOSEPH E. HAGEN

>Arrangements:-When 11 p.m. Where S.R.

[...]

>Remarks: all preparation, dressing, casketing done at Bethesda – USNH

>CASKET ORDER

[...]

>Remarks: Body removed from metal shipping casket at USNH at Bethesda

>CASKET DELIVERY DETAILS

>Date 11-23-1963 Time 2 A.M. Place U.S. Naval Hospital

([ARRB MD 129]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md129.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md129.pdf)))

When Joseph Hagan was shown this document during his interview by the Assassination Records Review Board, he reportedly said:

>At a later point in the interview, while reviewing Gawler's own document called a "first call sheet," Hagan was asked about a "2 A.M." notation made in the section which refers to the Mahogany casket's delivery to Bethesda. Upon review of this Gawler's document, he felt obliged to agree that this 2 A.M. entry must be the accurate time of the mahogany casket's delivery.

>Ultimately, his own response as he considered all of these inconsistencies in his recollections of the timing of various events surrounding the transportation of personnel, and the mahogany casket, was to say, "I can't put it all together."

[...]

>-"First Call Sheet": He recognized this one-page document, and said he saw his handwriting on several parts of it. He said it was his feeling that not all of the entries were made as events occurred, but rather, that some portions may have been completed 3 or 4 days after the fact. In the portion of the document titled "Casket Order," the handwritten entry found on the Remarks line which reads: "Body removed from metal shipping casket at USNH at Bethesda" was indeed his handwriting, but explained that he never did himself sight the object described here-he said he wrote this down simply because he was told the President's body had arrived in a metal casket, and did not know at the time that it was a bronze ceremonial casket, so simply described it as a shipping casket without having seen it because he was told it was "metal." In the section of this document called "Casket Delivery Details," he was surprised and at a loss for words when he sighted the "2 A.M." entry, because the entry led him to believe that his memory must have been incorrect about arriving with the Marsellus casket between 11:00 and midnight--ultimately, after considering this "2 A.M." entry, he said, "I can't put it all together."

([ARRB MD 182, *\*ARRB Meeting Report Summarizing 5/17/96 In-Person Interview of Joseph E. Hagan, ARRB Call Report Summarizing 6/11/96 Brief Telephonic Interview of Joe Hagan\**]  
([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md182.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md182.pdf)))

Tom Robinson told the ARRB:

>Gawlers Documents: -"First Call Sheet:" He has seen this document before; upon close examination, he recognized some of the handwriting as his own, specifically the sections labeled "dressing" and "remarks" at the top of the page. In the area near the bottom third of the page, ARRB staff asked him to describe what the entry "2 A.M." meant under "Casket Delivery Details." He said that the time "2 A.M. is "not right," i.e., incorrect, since he knows he and Joe Hagan arrived with the Marcellus casket early in the autopsy.

([ARRB MD 180 - \*ARRB Meeting Report Summarizing 6/21/96 In-Person Interview of Tom Robinson\*)([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md180.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md180.pdf))

From "*Gawler's "Arrangements File" which records arrangements for President John F. Kennedy's Funeral*":

>Extensive P.M. exam at USNH, Bethesda, MD - by U.S. Government

[...]

>Embalmers

>Joseph E. Hagan - I/C

>Thomas Robinson

>John Van Hoesen

>Edward Stroble

>Date Nov 22-23, 1963

>PERSONAL REMARKS

>When I saw the body at Hospital there was not jewelry present.

>11:45

>3:30

([ARRB MD 130])([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md130.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md130.pdf))

Regarding this document, Joe Hagan told the ARRB:

>-"Arrangements File": The reproduction of this multi-folding business document (the original was one long sheet of stiff paper or cardboard, with two vertical folds in it dividing it into 6 panels) consists of 6



photocopied pages. It contains basic descriptions of funeral arrangements, a page titled "Forwarding Directions," a page titled "Embalmer's Report," another titled "Personal Remarks," and one titled "Remarks." Re: the "Personal Remarks" page, Hagan said that the times "11:45" and "3:30" were his handwriting, and when asked to interpret the meaning of these entries, he said that 11:45 could refer to Gawler's start time (a little earlier than he had estimated earlier in the interview), and that 3:30 could refer to the time all of their work was concluded (also a little earlier than he had earlier recalled). He said the names listed on the "Remarks" page (O'Brien, O'Donnell, Powers, and O'Leary) are those Kennedy aides who visited Gawlers to select the mahogany casket about 11:00 P.M. on 11/22/63. On the "Personal Remarks" page, the entry which reads "Wilbert Triune, 3000 Ibs. with top, top only 900-1000" refers to the vault into which the casket was placed at burial in Arlington Cemetary; the entry which reads "Marsellus 710, 255 Ibs" refers to the casket selected by the Kennedy family retainers who visited Gawlers late on 11/22/63. On the page titled "Embalmer's Report," he said he made the decision at the time not to annotate or draw the President's wounds on the body chart, since a formal U.S. Navy post mortem examination was in progress, and he knew they would formally be documenting that information in much more detail.

([ARRB MD 182, \*ARRB Meeting Report Summarizing 5/17/96 In-Person Interview of Joseph E. Hagan, ARRB Call Report Summarizing 6/11/96 Brief Telephonic Interview of Joe Hagan\*] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md182.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md182.pdf)))

From "*\*Gawler's document "Funeral Arrangements for John Fitzgerald Kennedy" (undated, events of November 22, 23, 24, and 25 are recounted)\**":

>FUNERAL ARRANGEMENTS FOR

>JOHN FITZGERALD KENNEDY

>Friday, November 22, 1963

>GAWLER'S WAS NOTIFIED, BY TELEPHONE AT 4:25 P.M., TO BE PREPARED TO PROVIDE FUNERAL SERVICES FOR OUR 35TH PRESIDENT OF THE UNITED STATES JOHN FITZGERALD KENNEDY. THIS INSTRUCTION WAS RECEIVED FROM COLONEL PAUL MILLER.

>A SHORT TIME LATER, WE WERE ADVISED THAT A DETACHMENT OF CEREMONIAL AND SUPPORT PERSONNEL WOULD BE DISPATCHED TO GAWLER'S TO COMMENCE REHEARSING THE DEATHWATCH. THESE TROOPS ARRIVED AND REHEARSED FOR SEVERAL HOURS. A TELEPHONE CALL WAS RECEIVED FROM THE MILITARY DISTRICT OF WASHINGTON ORDERING ALL TROOPS TO WITHDRAW FROM THE GAWLER'S FACILITY FOR NEW ASSIGNMENTS.

>COLONEL MILLER NOTIFIED GAWLER'S TO DISPATCH A HEARSE TO ANDREWS AIR FORCE BASE TO MEET AIR FORCE ONE (#26000). ETA AT 5:58 P,M, MILITARY BODY-BEARERS WOULD REMOVE THE PRESIDENT'S BODY FROM THE AIRCRAFT TO OUR HEARSE, AND WE WOULD RECEIVE FURTHER INSTRUCTIONS IN REFERENCE TO THE DESTINATION, ETC.

>AT APPROXIMATELY 5:00 P.M., THESE ORDERS WERE RESCINDED AND WE WERE ADVISED THAT A U.S. NAVY AMBULANCE WOULD BE DISPATCHED TO MEET AIR FORCE ONE AND TRANSPORT THE PRESIDENT'S BODY TO ITS DESTINATION.

>COLONEL MILLER CALLED TO ALERT US THAT THE BODY WOULD BE TAKEN, DIRECT FROM AIR FORCE ONE TO THE U.S. NAVAL MEDICAL CENTER, IN BETHESDA, MARYLAND, FOR EXAMINATION AND ALERT OUR EMBALMING TEAM TO BE READY TO RESPOND TO THAT FACILITY PREPARED TO EMBALM, COSMETIC, DRESS, CASKET AND DO WHATEVER ELSE HAD TO BE DONE TO PREPARE HIS BODY TO BE RETURNED TO THE EAST ROOM, OF THE WHITE HOUSE, TO LIE IN REPOSE FOR PRIVATE VIEWING.

>MR. HAGAN HAD DISCUSSIONS WITH THE WHITE HOUSE, CONCERNING CATHOLIC EQUIPMENT.

>LATE EVENING MESSRS. O'LEARY, O'DONNELL, O'BRIEN AND POWERS (KENNEDY'S STAFF) ARRIVED TO SELECT THE CASKET FROM GAWLER'S SELECTION ROOM. (THE CASKET THE PRESIDENT ARRIVED IN FROM DALLAS WAS DAMAGED - FROM THE HANDLING ON THE AIRPLANE - AND THE AMBULANCE). THEY SELECTED A MARSELLUS 710 SOLID MAHOGANY AND A WILBERT TRIUNE/COPPER LINED VAULT.

>JOSEPH GAWLER IMMEDIATELY DROVE TO THE NAVAL MEDICAL CENTER FOR MEETINGS WITH MDW OFFICIALS, SECRET SERVICE, FBI AND HOSPITAL STAFF.

>JOSEPH HAGAN RESPONDED TO THE CENTER WITH THE EMBALMING TEAM – JOHN VAN HOESEN, EDWIN STROBLE AND THOMAS ROBINSON.

>GAWLER AND HAGAN CONTINUED MEETINGS WITH MDW, HOSPITAL STAFF, SECRET SERVICE, DEPARTMENT OF STATE, ETC. AT THIS MEETING WE WERE INFORMED TO STANDBY, UNTIL ALL EXAMINATIONS OF THE PRESIDENT'S BODY, WERE COMPLETED.

[Page 2]

>Saturday, November 23, 1963

>CLEARANCE WAS RECEIVED TO PROCEED WITH THE PREPARATION AFTER 11 P.M., NOVEMBER 22, 1963. UNDER THE SUPERVISION OF MR. HAGAN, THE EMBALMING, COSMETICS, RESTORATION (EXTENSIVE CRANIAL DAMAGE), DRESSING AND CASKETING WAS COMPLETED BY 4 A.M. ON SATURDAY, NOVEMBER 23, 1963.

>SECRET SERVICE AGENTS, UNDER DIRECTION OF ROY KELLERMAN, REMOVED THE CASKETED BODY OF THE PRESIDENT OUT OF THE AUTOPSY ROOM AREA ONTO THE LOADING DOCK IN THE SAME VICINITY AND PLACED THE BODY INTO THE NAVY AMBULANCE.

>SECRET SERVICE AGENTS HAD SUMMONED MRS. KENNEDY, ROBERT KENNEDY, TED KENNEDY, PRESIDENT KENNEDY'S SISTERS, MR. POWERS, MR. O'DONNELL, O'BRIEN, SECRETARY OF DEFENSE, McNAMARA FROM THE 17TH FLOOR OF THE HOSPITAL AND ESCORTED THEM DOWN TO AN-ANTEROOM NEAR THE LOADING DOCK. THEY REMAINED THERE UNTIL THE CASKET WAS SECURED IN THE AMBULANCE.

>ROY KELLERMAN, BILL GREER (S.S. Agents), JOSEPH GAWLER AND JOSEPH HAGAN ASSISTED THE PRESIDENT'S WIDOW AND ROBERT KENNEDY INTO THE REAR COMPARTMENT OF THE AMBULANCE. (MRS.KENNEDY WANTED TO BE NEXT TO THE PRESIDENT AND TOUCH THE CASKET AS SHE HAD DONE RIDING IN THE AMBULANCE FROM ANDREWS A.F.B. TO THE NAVAL MEDICAL CENTER).

>AGENT GREER DROVE THE AMBULANCE, AGENT KELLERMAN SAT UP FRONT WITH HIM. WE JOINED THE ESCORTED PROCESSION AND DEPARTED THE MEDICAL CENTER. WE PROCEEDED, WITH HEAVY SECURITY, (but no sirens) AT ABOUT 30 MILES PER HOUR. THE 9 1/2 MILE TRIP WAS CONCLUDED AT THE WEST GATE OF THE WHITE HOUSE AT 4:24 A.M [...]

([ARRB MD 134]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md134.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md134.pdf)))

When Joe Hagan was shown this document, he told the ARRB:

>-Chronology of Events of November 22-25, 1963 entitled "Funeral Arrangements for John Fitzgerald Kennedy": Mr. Hagan did not think that he had prepared this summary of events himself, and said that John Gawler had probably prepared this document.

([ARRB MD 182, \*ARRB Meeting Report Summarizing 5/17/96 In-Person Interview of Joseph E. Hagan, ARRB Call Report Summarizing 6/11/96 Brief Telephonic Interview of Joe Hagan\*] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md182.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md182.pdf)))

Researcher William Manchester based his 1967 book *\*The Death of a President\** on his interviews with several Bethesda witnesses, including the staff of Gawler's funeral home and the Kennedy aides who interacted with them:

[Book Two: Castle, Seven: LACE]

>Thus Gawler's, which had been vetoed by the Kennedy family, became part of the Presidential funeral. The damaged coffin was largely responsible—largely, but not entirely, for the issue of whether or not it was to be closed had not been resolved, and should the coffin have been open during the lying in state, the special arts of the undertaker would have been essential. Quite apart from that, however, the Attorney General was in a dilemma. He could scarcely permit a state funeral to proceed with a battered casket. A subsequent examination revealed that the Lieutenant and the two Generals had exaggerated the extent of the damage to Oneal's Britannia, and that the casket was neither cheap nor thin, but Kennedy could not have guessed that, nor could he have been expected to come down and make his own inspection. He had been right the first time; they must get another. And O'Donnell was also correct: the mafia must spare him the actual choice.

>Dave Powers squiggled:

>*\*Around midnight Ken, Larry, and I picked out a coffin for our President\**

(The book's index cites "*\*Powers, David. Handwritten notes of November 22–23, 1963\**")

>Dave omitted another Irishman. Muggsy O'Leary had been summoned from the morgue. In a night sated with sentiment the journey of this quartet was especially touching. Dave was naturally reminded of a story; it was about himself. "You know, the Irish always measure the importance of people by the number of friends who come to their wakes," he said in the car. "All my life I've thought of my wake being held in a Boston three-decker tenement. I just assumed he'd live longer than me, and I'd be so proud to have the President of the United States at my wake. And now here I am, going to get a casket for him."

>Gawler's selection room contained thirty-two coffins that night, each of them mounted on a velvet-skirted estrade which in turn stood upon thick, cream wall-to-wall carpeting. Flush overhead lights gleamed softly; a tape recorder provided appropriate background music. Joe Gawler led them in. According to O'Brien, "I said to the man at the display room, 'Would you show us the plainest one you have in the middle price range?' I don't know why I asked him that, but I think it was because I wanted the coffin to represent the American people. Therefore I thought it should be plain. And that's what we got. He said, 'Here.' He showed us several, and we took the one with the simplest interior. I never asked the price." According to O'Donnell, "The coffin we chose was the second one we looked at. I know that Larry and I had both reached the same decision simultaneously—that that would be the one we would use. It was plain."

>Tampering with their moving account is a pity, but the Irish, as John Kennedy once noted wryly, are not noted for their accuracy, and the casket in which he was to be buried is obviously a matter of some historical interest. Undoubtedly O'Brien's recollection of their intention is correct. Robert Kennedy was thinking along the same lines. He believes he spoke to O'Donnell about price while Ken was at the funeral parlor, and he has a clear memory of talking to a girl who told him, "You can get one for \$500, one for \$1,400, or one for \$2,000." She went on about waterproofing and optional equipment. Influenced by the Mitford book, he shied away from the high figure. He asked for the \$1,400 coffin, and afterward he wondered whether he had been cheap; he thought how difficult such choices must be for everyone.

>But all this is mysterious, because no one on Gawler's staff recalls talking to the Attorney General about price or anything else. Moreover, the casket O'Donnell and O'Brien picked—it was immediately to the left as they entered the selection room—could hardly be plain. Known to the trade as a Marsellus No. 710, it was constructed of hand-rubbed, five-hundred-year-old solid African mahogany upholstered in what the manufacturer described as "finest new pure white rayon." Gawler believed his visitors wanted "something fitting and proper for the President of the United States," which does not gibe with O'Brien's impression that they had purchased an ordinary coffin. It was unusual, and it was very expensive. In 1961 Jessica Mitford had found that the average bill for casket and services in the United States was \$708. Muggsy O'Leary thought the price mentioned in the selection room was \$2,000. Even that was low. Gawler's charged \$2,460. In a subsequent decision, the most expensive vault in the establishment went with it. The total bill, as rendered and paid, was \$3,160.

>Joe Gawler and Joe Hagan, his chief assistant, supervised the loading of the coffin in a hearse, or, as Hagan preferred to call it, a "funeral coach." The firm's young cosmetician accompanied them to Bethesda. The two caskets, Oneal's and Gawler's, lay side by side for a while in the morgue anteroom; then Oneal's was removed for storage and the undertakers, Irishmen, and George Thomas were admitted to the main room. The autopsy team had finished its work, a grueling, three-hour task,

interrupted by the arrival of a fragment of skull which had been retrieved on Elm Street and flown east by federal agents. The nature of the two wounds and the presence of metal fragments in the President's head had been verified; the metal from Oswald's bullet was turned over to the FBI. Bethesda's physicians anticipated that their findings would later be subjected to the most searching scrutiny. They had heard reports of Mac Perry's medical briefing for the press, and to their dismay they had discovered that all evidence of what was being called an entrance wound in the throat had been removed by Perry's tracheostomy. Unlike the physicians at Parkland, they had turned the President over and seen the smaller hole in the back of his neck. They were positive that Perry had seen an exit wound. The deleterious effects of confusion were already evident. Commander James J. Humes, Bethesda's chief of pathology, telephoned Perry in Dallas shortly after midnight, and clinical photographs were taken to satisfy all the Texas doctors who had been in Trauma Room No. 1.

>The cosmetician then went to work. In Hagan's words, "He was really under the gun. There were about thirty-five people, led by General Wehle, breathing down our necks. We were worrying about skull leakage, which could be disastrous. We did not know whether the body would be viewed or not." The application of cosmetics required nearly three hours. It was quite unnecessary, but that was not the undertakers' fault. Neither McHugh nor Burkley, who were in constant touch with the tower suite, could guarantee that the coffin would be closed. McHugh told Hagan it was better to take the time and be on the safe side. "The family may change their minds at any time," he said. Burkley had spoken to Mrs. Kennedy. He knew her wishes, "but," he explained afterward, "I was determined that the body be fully dressed and that the face be just right in case people opened the coffin a thousand years hence."

Jim Bishop's 1968 book *\*The Day Kennedy Was Shot\** is similar to Manchester's book, a narrative following the events at Bethesda Hospital. Bishop's sources included interviews with Secret Service Agent William Greer, as well as the staff of Gawler's funeral home. Bishop's epilogue section reads "...*\*William Greer, who drove SS-100-X, has retired from the Secret Service. I visited him at his home in Maryland. His wife was ill and it was not a time to badger a man with ugly memories, but he sat and said: "Go ahead. It will take my mind off other things." The men of Gawler's Sons were discreet and ethical\*...*".

[Part "*\*The Evening Hours\**", Chapter "*\*9 p.m.\**" (referring to Central Standard Time in Dallas, not Eastern Standard Time in Bethesda which is one hour ahead)]

[...]

>General McHugh kept saying that no one knew when the doctors would be finished. An embalmer hadn't been summoned. Originally, without consultation, most of the autopsy observers had figured that the body would be in the East Room by midnight. Well, it would be later than that. One o'clock? said Clifton. No one could be sure. Maybe two. Maybe even later. Time had dragged all day. Now events were dragging.

[...]

>Too many people were talking, too many were foaming with too many notions, and all things had to be dealt with at once. The western edge of the White House had aspects of a solemn football game, with young men running in and out of a jammed doorway, older men walking, heads down, to an office with a free telephone. Two would troop in with books and magazines relating to the funeral of Abraham Lincoln, while two others would debate the delicacy of inviting Senator George Smathers of Florida to the funeral. "He was a close friend of the boss." "I know, but he is also a Senator and he'll come in

with the Senate group.” An elder statesman, Averell Harriman, sat bowed like a scarecrow in a perverse wind. A young government press agent, David Pearson, asked: “Mr. Ambassador, aren’t you a good friend of President Truman’s?” The long, lined face lifted; the head nodded. “Would you please contact President Truman, President Eisenhower, and President Hoover and invite them to come tomorrow morning?”

>Without a word, the old one got to his feet and walked to another office to make the calls, issue the invitations. It had already been done by President Lyndon Johnson, but those in Dungan’s office were not aware of it. Eisenhower and Truman would be in Washington tomorrow, to pay their respects to Mr. Kennedy and to confer with Mr. Johnson. Mr. Hoover was too ill to attend. It would take two hours of Harriman’s time to ascertain this.

>The Kennedy group had swift and accurate reflexes, but the death of their leader thrust upon them an unexpected event of magnitude. His death undermined the power structure and, as it crashed in chaos this evening, they planned a funeral which only the most callous would forget. The sunburst vision of charisma which the young man had displayed in all his political battles must, somehow, be made to shine for three additional days, when the bright light would be extinguished forever. As they had planned the best, the biggest, the most dramatic battles in the political wars, so too the final homage to his remains must be enormously tragic. He was a lot more than Jack Kennedy, rich bon vivant; he was President of the United States.

>Shriver cut off the phones for a moment to draw up a draft of a plan. “Let’s call 10 A.M. tomorrow,” he said, “the first hour.” He wrote “Saturday 10 A.M.” on foolscap and, beside it, “President’s Family.” It was a start. He wanted a priest there for prayers for the dead at that time. At 11 A.M.—who?—ex-Presidents, maybe the Supreme Court. Noon—noon, perhaps the diplomatic corps. One P.M.—the United States Senate. But what about burial?

>Where? What city? What cemetery? Brookline, Massachusetts? Did anyone recall where the baby had been buried last summer—Patrick Bouvier Kennedy? Somewhere near Boston. A family plot probably. On the other hand, Mrs. Kennedy may have thought of a place—certainly she would express her wishes. Two of the volunteers recalled that in March 1963 the President had strolled from the Tomb of the Unknown Soldier down the green cascading hill of Arlington National Cemetery. It was a sparkling day. The capital, stretched below, was a geometry of broad boulevards and impressive buildings and monuments.

>Three hundred feet below the Custis-Lee Mansion, he had paused to drink the exquisite view. He stood among the ranks of small white headstones, the military dead of several wars, and he said: “I could stay here forever.” This, thought Sargent Shriver, might be the last opportunity to grant him a wish. At Bethesda Hospital, Secretary of Defense Robert McNamara had already remembered that day, that stroll, that wish. Mrs. Kennedy had greeted the recollection with an approximation of joy. It is rare to know a young man’s last wish. The decision was made.

>The hour was late, but the caretakers at Arlington were summoned. They consulted plans of the cemetery. They, too, were grief-stricken and, even though the average soldier-citizen gets no more than a four feet by eight feet section of the cemetery, they found an unused area on the spot where John F. Kennedy had stood and offered three acres of ground. Someone announced it to the press, and there was resentment among the people at anyone getting that much ground. President Kennedy could settle for less.

>Shriver marked off Sunday afternoon for the lying-in-state in the Capitol of the United States. Here the people could form into long queues and file past the box. Monday, the funeral. That would be Monday morning. Probably 10 A.M. There would be a Mass of requiem in either the newly completed Cathedral of the Immaculate Conception or Saint Matthew's Pro-cathedral. Mustn't forget a naval guard of honor. Lieutenant John Fitzgerald Kennedy was United States Naval Reserve. Mustn't forget many things and many people. How many chiefs of state would fly to Washington? The time was 3:30 A.M. Saturday in western Europe; there would be no point in using the so-called "hot lines" at this hour. Still a note could be made to start phoning at 5 A.M. Eastern Time.

>A funeral doesn't accord time to its planners. No one could guess how many people could be accommodated in either of Washington's Roman Catholic cathedrals. Someone could call Bob Kennedy at once, at least, and find out what the family wishes were? Then, once the capacity of the pews was known, space could be reserved for the family, the personal friends, the chiefs of state, the diplomatic corps, the Senate and House committees, the Cabinet, the Joint Chiefs of Staff, the three pool men of the newspaper wire services.

>At the hospital, the Attorney General placed an arm around his sister-in-law. He walked her away from the conversational groups, looking at the rug under his feet. Robert Kennedy knew how to "handle" Jacqueline Kennedy. She reposed great confidence in him. He knew that each decision she made tonight represented an additional wrench of the heart. But she had to keep making decisions. "We should get some clothes for Jack," he said softly. She had not thought of it. What kind? Mrs. Kennedy thought it over. She remembered that he had a dark blue pinstripe suit, a plain blue tie with a small pale figure in it, a white shirt, of course, and a pair of black shoes.

>A Roman Catholic would want a rosary entwined in his hands. The President had beads in his room. On the other hand, Prince Stanislaus Radziwill, married to Mrs. Kennedy's sister, offered his rosary. It was accepted. Mrs. Kennedy remembered that her husband cherished a solid gold Saint Christopher medal which she had given him. Mrs. Kennedy wanted that medal in the casket with Jack. It was a girlish sentiment. She had others: she planned to write a final note to her husband and to seal it in the casket with him.

>The Attorney General walked out into the hall and asked Clint Hill to telephone the White House for the clothes and medal. The Secret Service agent phoned George Thomas, the valet, and listed each item. "Just get them together with underwear and give them to a driver on the South Grounds. Tell him to deliver them to the autopsy room at Bethesda."

>The medal could not be found. It was in the President's wallet, twenty feet from his body. William Greer had it.

>The two Secret Service agents had breakfast at 6:30 A.M. in Fort Worth. They had come a long hard way, so when an officer whispered: "I'll have a man take you up to the commissary," Roy Kellerman and William Greer looked guiltily at each other and said: "Thank you." It had been fifteen hours since they had coffee, and yet the requirements of the stomach seemed out of place in an autopsy room. An enlisted man took them from the room and, when they got to the restaurant, they asked what was ready to eat. "Chicken, rolls, and coffee," was the response.

>"All right," said Kellerman. They sat, working their broad fingers on the formica tabletop. The stomachs were hungry, but the thoughts negated food. Kellerman and Greer had been with the "boss"

from the start, and with other Presidents before him, but there was nothing to talk about. They glanced around the room, smelled the steam-heated chicken, and mouthed safe words about nothing in particular. Both were tough law enforcement officers. Since losing their man, it seemed heavy for the spirit to see and watch his autopsy, too.

>Neither knew much about the afternoon and evening events in Dallas, except that Robert Kennedy had told Kellerman that a young self-professed communist had been arrested. The plates of steaming chicken arrived, and both men looked at them and decided to try the coffee. They sipped and stirred and ate two rolls. In fifteen minutes, they were back in the autopsy room.

>Outside the room, Greer found two men in medical coats trying to get into the room. A check showed that they were newspaper reporters. They left without dispute. Inside, Sibert and O'Neill of the FBI were receipting a glass container with metal slivers taken from the brain. At the same time, Dr. Burkley's enlisted men were delivering a piece of skull. Burkley gave it to Dr. Humes, who made a sketch of it, examined it, and, with Boswell and Finck watching, found where it fitted.

[...]

[Chapter "*10 p.m.*"]

>Fatigue was not obvious on the faces of the three doctors. The work was exacting, and weariness was there as they strode around the corpse, making their observations, nodding agreement, trying too strenuously not to overlook any aspect of the body and its wounds. The trio of white ghosts walked the post of the dead with such infinite care that their signed conclusions were predestined toward error. When mistakes are most costly, careful craftsmen are the first to pay.

>With the chest and belly open, Humes, Boswell, and Finck examined the lining of the thoracic cavity and found it "unremarkable." The organs were removed one at a time to be washed, weighed, and examined for grossness. The man on the table, in spite of his chronic back pain, was a healthy human. The coronary arteries were smooth-walled and elastic. In the abdomen there was no increase in peritoneal fluid. An old appendectomy displayed a few minor adhesions between the cecum and the ventral abdominal wall.

>Fresh bruises were found on the upper tip of the right pleural area near the bottom of the throat. There were also contusions in the lower neck. Humes called his doctors away from the table and asked the Navy photographer to shoot additional Kodachrome pictures. The lens picked up a bruise in the form of an inverted pyramid. It was a fraction short of two inches across the top, coming to a point at the bottom. A few of the contused neck muscles were removed for further examination.

>The autopsy was complete. The men of medicine had been on their feet a long time. The outer covering of the body was sewed in place again. The Navy passed the polite word—this time to Admiral Burkley—that it had completed the autopsy and declined to do the embalming. The Navy photographer passed the cassettes of film to Roy Kellerman and waited for a receipt. A long sheet was floated across the body. Enlisted men began to untie the backs of medical gowns and the doctors peeled gossamer-thin gloves from their fingers.

>Witnesses stood. They stretched their limbs. The last act was over, but the spotlight remained focused on the long sheet. The long bony feet stuck out. Greer looked and remarked that they were amazingly white. The toes turned slightly outward. He wondered why the vision struck an echo in his mind. He



had seen those feet looking like this at Parkland Memorial Hospital. Trauma One. A man could be forgiven for asking himself how long ago that might be. No one noticed the enlisted men hosing down the floor.

>The dead man was scarred, but so were the living. He would not remember his scars, but they could not forget theirs. Greer, solid, strong, middle-aged, had years of dependable work in him but the thought had crossed his mind to get out of the Secret Service and spend more time with Mrs. Greer, who was not strong, and a growing son, who would appreciate male guidance. Kellerman was granite, but for years to come his mind would freeze in immobility when he thought of November 22, 1963. He could not force himself to discuss the day.

>Some Federal officers would quit within the next month. Others would ask for other assignments. A few became embittered. Rowley, the Chief, would remain on to defend his men and expand the Secret Service, even though he had sustained the greatest loss—losing “the boss”—and the private knowledge that, at home, a most attractive daughter was losing her sight.

[...]

>One question remained: the wound in the back of the neck. It could not be resolved now. Humes knew this, and he was in no hurry. The hour was late and he was half-persuaded that a bullet, reported found on a stretcher in Dallas, could be the one which had inflicted this wound and, that when manual respiration of the chest had been instituted, the pellet had fallen out. It was a possibility. Neither Humes nor Boswell nor Finck could be sure tonight what had happened.

>They had used a lot of time making certain of their findings. They had studied that body with great and minute care. The X-rays were more than would normally be taken; the color photographs; the black and white photographs; each doctor had placed a finger into that small hole at the base of the neck; resistance was felt between the first and second knuckle. The FBI men, Sibert and O’Neill, had been ordered to draw up a summary of their observations and, even though they had no medical qualifications, they could not wait for word from Parkland Hospital.

>Their report would state: “This opening was probed by Dr. Humes with the finger, at which time it was determined that the trajectory of the missile entering at this point had entered at a downward position of 45 to 60 degrees. Further probing determined that the distance traveled by this missile was a short distance inasmuch as the end of the opening could be felt with the finger.” The use of the phrase “end of the opening” was a conclusion. No one had called it “the end of an opening.”

>It is one thing to draw attention to a mystery; it is another to resolve the mystery without qualification. Secret Service Agent Roy Kellerman followed the agents to a similar conclusion as a result of the superficial findings of the physicians. “There were three gentlemen who were performing the autopsy,” he wrote. “A Colonel Finck—during the examination of the President, from the hole that was in his shoulder, and with a probe, and we were standing right alongside of him, he is probing inside the shoulder with his instrument, and I said: ‘Colonel, where did it go?’ He said: “There are no lanes for an outlet of this entry in this man’s shoulder.”

>Doctor Humes, in his preliminary notes, courted the same easy conclusion: “The pattern was clear,” he stated. “One bullet had entered the President’s back and had worked its way out of the body during external cardiac massage, and a second high-velocity bullet had entered the rear of the skull and had fragmentized prior to exit through the top of the skull.” By the time Humes was ready to write his

official findings, to be signed by Boswell and Finck as well, his opinion of that neck wound had been reversed by information from Parkland Hospital:

>“. . . The missile contused the strap muscles of the right side of the neck, damaged the trachea, and made its exit through the anterior surface of the neck. As far as can be ascertained this missile struck no bony structures in its path through the body.” The important phrase, this time, is “through the body.” It is to be doubted that any physician, encountering strap muscles which had reclosed the lane after opening it for the neck bullet, could have divined that the tracheostomy, so plainly surgical on the front of the neck, could have started out as a small exit wound. But then it is doubtful that many physicians would have permitted themselves to be badgered into a summary opinion.

[...]

>The recollections had run out. The conversations were desultory. At this hour no one could think of anyone to call on a telephone. The Attorney General was relieved when word reached the seventeenth floor that the autopsy was over. He asked about the medical findings but was told that they were tentative, mostly involving a big head wound and a shot in the back of the neck. The White House already had the news.

>Shriver reminded Robert Kennedy that the family had to go to Gawler’s and select a casket and bring an embalmer to Bethesda. This was an integral step which had been overlooked. Mrs. Kennedy saw her brother-in-law approach, and she must have known that another decision would have to be made. He began by reminding her that the Secret Service had damaged a handle on the Oneal casket. She said that she had no intention of using that casket anyway. Mrs. Kennedy did not want to be reminded of Dallas. She would not use that casket; she could still see herself running after it, holding her fingertips on the top, as official Dallas shouted that the President’s body would have to remain for an autopsy. The terror had been lodged within her from the sound of the first shot, and nothing since had lessened the pain.

>Kennedy told her that Shriver had asked about funeral directors, and three names had been submitted as establishments of good taste. Sarge had selected Gawler’s, and, if she agreed, someone would have to go there and select a casket. Did she have any ideas? She did not. Did she want any special person to select it? Before she could answer, the Attorney General said: “Kenny and Larry and Dave were very close to him. Why not send them?” Mrs. Kennedy agreed.

>The three men were ready to leave. All they asked was some guidance on what kind of casket the family would like. And how about that embalmer? They were told not to worry; the embalmer should be waiting. He had been on notice for a couple of hours. They asked Clint Hill to have a car ready at the front entrance and have the driver find out how to get to Gawler’s.

[Chapter "*11 p.m.*"]

[...]

>Too fast to some, too slow to others. In Washington, Muggsy O’Leary drove down Wisconsin Avenue and turned into the big parking lot at Harrison. He and the tough, sentimental Gaels-O’Donnell, O’Brien, and Powers - felt that this was the longest, slowest, saddest day of any year. It was a day of so many scores of individually remembered sorrows that no one of them could recall them all. O’Leary, a

Kennedy idolator, was a member of the Secret Service because John F. Kennedy endorsed the appointment. The blackbeard, O'Donnell, sat watching the lights of his world flash by the car to explode into the blackness behind. O'Brien, the conciliatory redhead, the onetime bartender, the political mathematician, was doing something that had to be done. He did not relish the task, but he may have been affronted if someone else drew the assignment. Powers, the bald ward leader of Boston, the man who first looked politically upon the tall stuttering son of Joseph P. Kennedy, Sr., the man who first said: "Okay. I'll try to make a Congressman of you" - this is the one who knew the aspirations to be said for the repose of the soul, the spiritual phrases which begged clemency for the sinner.

>These went to buy a casket. A saint does not comprehend the finality of death; a sinner does. The four men knew the mystery of death as they knew the zest and joy of political battle. Death was an unlocked front door; the musty odor of flowers; a red vigil light; camp chairs; the ferns; stiff blue knuckles clutching the black rosary; the sonorous voice of the priest, kneeling before the casket, intoning: "Blessed be God! Blessed be His Holy Name . . ."; it was the sobs of the women; the cautious handshake of old enemies; ham and whiskey in the kitchen; old men puffing pipes and remembering him that was in the box and his father before him and that one's father before him.

>It was a brand-new building, a Georgian structure with lights in the hedges splashing a glow on the pale brick. This was Joseph Gawler's Sons. In one hundred thirteen years, it had buried three generations of its own, and the fourth waited inside the white doorway. There is no trade, no profession, which stands in such permanent delicate balance as a funeral home. It must be solemn but not doleful; helpful but not cheerful; competent but not morbid; spiritual but not hyper-religious; cordial but not intimate; ready to assist but not overbearing. Joseph H. Gawler understood his function. He stepped forward as the four men came in, and introduced himself and his operations manager, Joseph E. Hagan. The four looked around. The lobby floor was white marble relieved by small black diamonds. There was a circular staircase to the right with ember-red carpet and balustrade; a crystal chandelier hung down from another floor.

>O'Donnell began to explain their presence. Mr. Gawler interrupted. He understood. The phone call from the White House had explained everything. The visitors felt relieved. Mr. Hagan, a short man with the air of one who is accustomed to becoming confidential within a short span of time, said that he understood that embalming of the President would also be required. Powers nodded. Hagan just wanted the strangers to know that Gawler's was prepared. He had an embalming team waiting in an office to the left; John Van Haesen, Edwin B. Stroble, and Thomas Robinson. Gawler, a brown-eyed man with a ruddy complexion, said that they wanted the Kennedys to know that, in spite of the hour, everything could be accomplished to the satisfaction of the family.

>The gold-lined elevator moved in silence. The four were in a world of sedate whispers. They passed the second floor, with its array of large rooms furnished in French provincial. At the third floor, the party turned left and Mr. Hagan opened the double doors leading to the selection room. The men stepped into a cool place on heavy beige broadloom. Recessed squares in the ceiling bathed the place in warm light. In an alcove and a main room there were two dozen caskets. The men hesitated, eyes darting. There were gray metallic boxes, grayish suede; there were gleaming metal caskets, some in mahogany, some burlled in a blackish wood. A few were open, disclosing the white shirred satin. All stood on carriages hidden by pleated skirts.

>The men seemed embarrassed to be in the room. They wanted “something in good taste.” Hagan didn't care to remind them that everything in the room was in taste. It required a little coaxing to get them inside the big room, where they could examine the array of merchandise. Mr. Gawler said that his original impression had been that President Kennedy would rest in the funeral home, but that . . . No, they said, he would repose in the White House, where he belonged. They walked slowly around the boxes, none with any knowledge of what Mrs. Kennedy would appreciate.

>Someone said that price was not a factor. The Gawler group understood that, but they wanted it understood that there was a standard price on each of these items, that a casket would cost no more for the President's family than for anyone else. This also applied to their services at the hospital. Above all, Gawler's exuded an aura of quiet confidence, and this pleased the four men. Two of them stood beside a polished mahogany casket with ornate silver handles. They thought perhaps that something along these lines . . .

>The others joined them. They walked around the box. The half-lid was lifted. It looked rich and solemn. There wasn't a hint of garishness. Walking around it, the men noticed that it picked up arrows of light from the ceiling. “This one,” they said. Mr. Gawler said that it would be delivered at Bethesda Hospital within the hour. Yes, O'Donnell said. Please do whatever must be done as quickly as possible.

>Hagan had heard on television that the President had sustained a massive head wound. The embalming team might find it necessary to process part of the skull, matching it identically with the real color and texture of the hair. It could have saved time if Hagan or Gawler had asked about these things before leaving for the hospital. Some things are left unsaid. It would require a little more time, but it would be worth it to assess the cosmetic damage themselves and plan the repair work.

>The four men were outside in the crisp night air within twenty minutes. They were glad to be out again. It is a triumph to be alive in the presence of death. It is deadlier to be able to walk away from it.

The poetry of the sentimentalist is dolorous. As he treads the edge of eternity to do a service for a friend, he too dies.

[...]

[Part "*The Midnight Hours*", chapter "*12 midnight*"]:

[...]

>The show was over. The audience had dissipated. Roy Kellerman phoned Clint Hill on the seventeenth floor. "Come on down," he said. "I want you to look at these wounds." The Gawler group arrived. Joseph Hagan introduced himself and his assistants to a Navy enlisted man. For the embalming, he had Mr. John Van Haesen, Mr. Edwin Stroble, and Mr. Thomas Robinson. They would not begin their labors until the autopsy team signified that its work had been completed.

[...]

>In the autopsy room, the sheet was removed from the President's body, and Kellerman ordered Clint Hill to make his observations. The body was turned face down, then returned to its original position. Hill was stoical as he noted a bullet puncture at the base of the neck in the back and a small hole in the rear of the head, in addition to the big rent in the middle of the head. He was sent back to the Kennedy suite to stand guard and to file a personal report.

[...]

>The three men were replaced by four. The function of the new men was to restore John Fitzgerald Kennedy to an approximation of serene sleep. In a manner of speaking, this is the most tender and most difficult of services. It is normally performed in secrecy. For Joseph Gawler's Sons, it would have been easier to take the body to their establishment. The instruments and material would be at hand, and the body could have been returned in ninety minutes.

>This was not permitted because Mrs. Kennedy did not want the body taken from the hospital. Understandably the word hospital did not have the note of finality encompassed in "funeral home," "autopsy," and "embalming." It lifted the weary spirit a trifle to think of a Navy officer in a Navy hospital. It postponed a final accounting.

[...]

[Chapter "*1 a.m.*"]

[...]

>The final abuse of the body was under way. Pumping leads were established under the armpits. One forced a formaldehyde compound through the arteries of the body as a tube on the opposite side accepted the last of the body's blood. Gawler's men were efficient and almost silent. The four maintained their separate tasks. This time it was difficult to keep the hands from trembling. All of the hour had lived in and around the capital with this charmer, this buoyant President. When the sheet was

curled off the body, the professionals looked at what was left. Each man kept his features immobile, but each felt the depression of death.

>A cosmetician studied the bloated face. Roy Kellerman got to his feet, walked over, and whispered: "How long?" the answer, whispered, was "Not long." He asked again "How long?" An embalmer looked at his wristwatch. The time in Washington was 2:30 A.M. "An hour," he said. "An hour and fifteen minutes." Roy Kellerman strode back to his witness chair and phoned Clint Hill. "Tell the Attorney General we leave about 3:45," he said. "Tell the White House too."

Edwin Stroble, who was said to have helped reconstruct the skull, died on 5/29/1976 ([Herald & Review, 11/25/2013, *\*Embalmer also connects area to the assassination\** by Bob Fallstrom] ([https://herald-review.com/special-section/jfk/embalmer-also-connects-area-to-the-assassination/article\\_b4c2715c-55c6-11e3-a056-0019bb2963f4.html](https://herald-review.com/special-section/jfk/embalmer-also-connects-area-to-the-assassination/article_b4c2715c-55c6-11e3-a056-0019bb2963f4.html)); [Effingham Daily News, 2/22/2014, *\*Altamont native prepared John F. Kennedy for funeral\** by Nathan Scholes] ([https://www.effinghamdailynews.com/news/local\\_news/altamont-native-prepared-john-f-kennedy-for-funeral/article\\_de225411-14e0-5c03-bc9b-b74e71dc901c.html](https://www.effinghamdailynews.com/news/local_news/altamont-native-prepared-john-f-kennedy-for-funeral/article_de225411-14e0-5c03-bc9b-b74e71dc901c.html))), before he could be properly interviewed.

On 1/12/1977, Tom Robinson talked to the House Select Committee on Assassinations. Robinson's statements suggest that, after arriving at the morgue, he had to wait while the examination was in progress: "*\*Well it exited in many pieces. They were literally picked out, little pieces of this bullet from all over his head\**", "... *\*Well they had the little pieces, They picked them out\**", "*\*Yes, I was watching all this and I asked him about it. After he discussed with me the reason why all those people had to be there, I had questions for, I wanted to know\**", "*\*Yes, I watched them pick the little pieces out. They had something like a test tube or a little vile or something that they put the pieces in\**", "*\*The lungs were examined very carefully by the physicians. I remember that\**", "*\*They had lots to say about everything they did\**", "*\*Now this is where I'm hazy. I can remember the probe. The probe of all this whole area. It was about an 18 piece of metal that we used\**", "*\*I don't remember, I remember them probing\**", "*\*I remember they talked about it. They took notes, made notes\**", "*\*You see they were working around the table, and when I would get a glance as one would come by, someone would step aside\**" ([ARRB MD 63]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md63.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md63.pdf)) [[text](<http://www.kenrahn.com/Marsh/Jfk-conspiracy/ROBINSON.TXT>)] [[audio] ([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_Robinson.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_Robinson.htm))]).

John Van Hoesen told the HSCA, referring to the skull, "*\*I recall them using a saw\*...."* ([[Audio] ([https://www.maryferrell.org/audio/HSCA/HSCA\\_VanHeusen.mp3](https://www.maryferrell.org/audio/HSCA/HSCA_VanHeusen.mp3))]).

On 3/25/1980, John Van Hoesen was interviewed by researcher David Lifton. Lifton summarized in his book *\*Best Evidence\**:

>John Van Hoesen, of the Gawler firm, sat in the bleachers in the autopsy room. He told me: "When we got up there, nothing had been started; then we had to wait for the autopsy; and then, periodically, more pictures were being taken—you know, different angles and so forth; where the entry was, and so forth; this angle, and that angle. . . ."^43

(\**Best Evidence: Disguise and Deception in the Assassination of John F. Kennedy*\* by David S. Lifton, 1980, Chapter 7. \*Synthesis\*, \*The Y-Incision: When Was It Made?\*)

On 11/20/1988, the Dallas Morning News presented a timeline of the assassination. Listed under "*11 p.m. to midnight*", Lawrence O'Brien was quoted as saying "*After a considerable period of time of just sitting around, frankly, or standing around, it dawned on us that the casket had been marked up, the handle had been broken, and don't ask me what prompts you to do things like this, but... I suggested that Ken (O'Donnel) and I go to the nearest funeral parlor and select a casket... We went down to Gawler's Funeral Parlor and... I remember saying to the man... 'Will you show us the simplest casket in the display of middle-priced caskets?' And he pointed it out to us and we asked him to move it up to the hospital immediately*" ([Dallas Morning News, 11/20/1988, \*In Their Own Words\*, \*Nov. 22-25, 1963\*](<http://jfk.hood.edu/Collection/Weisberg%20Subject%20Index%20Files/A%20Disk/Assassination%20JFK%2025th%20Anniversary%20Dallas%20Morning%20News/Item%20001.pdf>)).

Joseph Hagan was later interviewed by researcher Harrison Livingstone, as summarized in Livingstone's 1993 book *Killing The Truth: Deceit and Deception in the JFK Case*:

[Appendix J; *Encyclopedia of Medical Events and Witness Testimony* by Harrison E. Livingstone and Katlee Link Fitzgerald]

[...]

#### >**\*PREPARING THE BODY FOR BURIAL\***

>Joe Hagen: "I had some guy screaming at us the whole time... some air force major... There was a lot of interference with the autopsy, I understand." (Interview of Hagen by Harrison Livingstone and Kathlee Fitzgerald)

>The professionals from Gawlers Funeral Home arrived while "they were proceeding with the post mortem... the head, I think the thoracic cavities and all, had been opened... our hearse took the (mahogany) casket out to the Naval Hospital late that evening... we dressed him and rolled the casket right in and put him in it." (Interview of Joe Hagen by Harrison Livingstone and Kathlee Fitzgerald, 8/15/91)

[...]

#### >**\*THE "SHIPPING CASKET" STORY\***

>[A document discovered by Patrick Boyles surfaced, which originated at Gawlers Funeral Home in Washington, and was passed around at the 1992 Dallas A.S.K. Conference](<https://www.history->

[matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md129.pdf](http://matters.com/archive/jfk/arrb/master_med_set/pdf/md129.pdf)). The document had a handwritten notation on it which read "Body removed from metal shipping casket at USNH at Bethesda."

>Joe Hagan, the president of Gawlers, wrote this himself. (Interview with Kathlee Fitzgerald and the author, March 31, 1993.) Hagan explained that the confusion is over semantics. He told me that the use of the term "casket" cannot be confused with what bodies are normally shipped in, such as a Zigler case, an air tray, a combination casket, or a "shipping container" which he said is what the military normally ships a body in. He stated that it would always be called a "container" in that case, and is not considered a casket, nor would it be called a casket.

>Hagan went on to say that "The only reason we use that phrase was to identify the casket as a casket and as metal." He said that noone at Gawlers saw the body come out of the casket. nor was anyone from the funeral home there when the body arrived, but came much later, so they had no knowledge of it. He wrote the notation about a shipping casket because this is what he was told the body came in from Dallas. He said that noone would have called it a casket if it had been a shipping container or anything else, and that a casket is only called a casket if it is for viewing. (See Medical Encyclopedia Appendix for witnesses and events regarding the shipping casket.)

From a report on Hagan's 5/17/1996 interview by the Assassination Records Review Board:

>Mr. Hagan, in response to a subpoena he requested from the ARRB, brought the Gawler's document file on President Kennedy's preparation for burial with him, and submitted to a lengthy ARRB interview of approximately 2.5 hours, which was audiotaped on two 90-minute cassettes. Following the interview, Mr. Hagan was sent a copy of the audiotape, in lieu of a transcript (which was not created). Tim Wray conducted the majority of the interview.

>This is a summary of the principal points covered in this lengthy interview. All events described are as they were represented by Mr. Hagan during the interview; i.e., represent his opinions and recollections, without any emendations.

>(Today Mr. Hagan is President of Gawler's; in 1963 he said he was an "Operations Manager," a person who had a supervisory role in regard to the duties of all funeral home employees involved in preparation for burial.)

### >**\*\*Notification of Gawler's Involvement in President Kennedy's Funeral Arrangements\*\***

>Gawler's was called at about 4:25 P.M. on 11/22/63 by Colonel Paul Miller, Chief of Ceremonies and Special Events for MDW, and asked to prepare President Kennedy for burial. Immediately after receiving this call, Gawler's independently called back Colonel Miller at MDW to confirm the authenticity of this tasking. Gawlers was told 3 things during this second telephone call:

>-Provide Funeral Services for President Kennedy;

>-Have a hearse at Andrews AFB for "wheels down" of Air Force One about 6 P.M.; and

>-That the body of the President would be driven in their hearse directly to Gawlers.



>Orders then began changing--after the fact, Colonel Miller told Hagan this was due to orders received from Sergeant Shriver, who had taken charge of funeral arrangements at the White House on behalf of the Kennedy family. Miller told Hagan later that there was great uncertainty the evening of 11/22/63 over where the President was to be buried, the type of ceremony to be arranged, etc--that the situation was very fluid.

>A "death watch," i.e., Honor Guard troops (Branch of Service not specified), arrived at Gawler's and set up a 'command post' prior to the arrival of Air Force One at Andrews.

>At the "last minute," Gawler's received a call from someone (probably Colonel Miller again, or possibly Jack Metzler, Superintendent of Arlington Cemetery) who directed Gawler's NOT to send the hearse to Andrews AFB, since a Navy Ambulance would be used instead to transport the President's body. (At this time the destination of the body in the Navy ambulance was not specified.) [At a later date Colonel Miller told Hagan that at one point on 11/22/63, there had been a plan for a helicopter to take the President's body from Andrews to the Naval Hospital at Bethesda, but that the helicopter transportation plan had been cancelled.] Finally, Gawler's was instructed to send their embalming team to the Naval Hospital. He specified that they never drove to Andrews.

### >**\*\*Embalming Team to Bethesda\*\***

>The embalming team consisted of Joe Hagan (Operations Manager and Supervisor), and the following three "hands on" working personnel: Tom Robinson, John Van Hoesen (pronounced "Van Heusen"), and Edward Stroble. [Ed Stroble is now deceased.]

>Hagan first said the embalming team went out to Bethesda (on 11/22/63) "around 11:00 P.M.," and said that the autopsy on President Kennedy was still in progress when they all arrived, recalling that the body was still on the table being examined.

>He then said that some members of the team (not including himself) may have gone out to Bethesda earlier in the evening in a private automobile, vice the hearse.

>He then made a further correction, recalling that the other members of the embalming team had gone to Bethesda about 11:00 P.M., ahead of John Gawler and him, because he and Mr. Gawler had met with Kennedy aides at the funeral home and assisted them with the selection of a solid plank Mahogany casket for the state funeral. He then, along with John Gawler, drove the casket out to Bethesda in the hearse, arriving sometime near midnight, but no later than 12:30 A.M. on 11/23/63.

>He said that the Gawler's hearse (with the Mahogany casket inside) arrived at the loading dock behind the morgue, and was directed to park there by Secret Service personnel. He said Roy Kellerman was present that night at the autopsy, and that Kellerman controlled the entrance of personnel into the morgue during the autopsy. [He explained that he knew Roy Kellerman from previous professional association, without providing the details.]

>At a later point in the interview, while reviewing Gawler's own document called a "first call sheet," Hagan was asked about a "2 A.M." notation made in the section which refers to the Mahogany casket's delivery to Bethesda. Upon review of this Gawler's document, he felt obliged to agree that this 2 A.M. entry must be the accurate time of the mahogany casket's delivery.

>Ultimately, his own response as he considered all of these inconsistencies in his recollections of the timing of various events surrounding the transportation of personnel, and the mahogany casket, was to say, "I can't put it all together."

### >**\*\*Events Observed at the Autopsy on President Kennedy\*\***

>Hagan said the embalming team waited in the morgue, in the bleachers, while the autopsy was still in progress. He said that about 25 people were in the morgue. Roy Kellerman was controlling entrance into the morgue. The atmosphere in the morgue was tense, and there was a sense of panic in the air--by this he explained people were acting "touchy." (When asked to elaborate upon these remarks, he said he could remember no specifics, and simply spoke of the general situation; i.e., a young President had been assassinated, and the facts were unknown.)

>Hagan said that when he arrived with the mahogany casket, the autopsy was almost over; he only had to wait in the gallery about 20 minutes before the autopsy was concluded. The body of the President was being "cleaned up." Hagan said photos were being taken, but could remember no details--he could not remember which views were shot, how many photographers there were, or any details about their equipment. He can recall no specific remarks, conversation, or conclusions by the doctors. It was obvious a "full post" had been done, since the thoracic and abdominal cavities on the President's body were open. The brain was not in the cranium when he arrived. He cannot remember whether he saw the brain that night or not. The head of the President was supported on a block. Hagan said he did not recall whether or not there was a wound on the back (posterior thorax) of the President- he simply said there "could have been," and then explained that the Gawler's team, in the course of their work, left the body supine, and did not turn the body over. He said he did see the autopsy prosecutors turn the President's body over so that it was lying face-down, but that he simply did not remember details about what he observed during that event. He said his vantage point in the gallery during the autopsy was perhaps 12-15 feet away from the President, but that it was sometimes difficult to see the President's body because of the people working around the morgue table. He said he did not recall seeing any probes used.

[...]

### >*\*The Work of Gawler's Personnel to Embalm and Reconstruct the President's Body\**

>*\*Embalming\**: Hagan said that the embalming team conducted a standard arterial embalming, and that no problems were presented in the course of this standard procedure (which involves injecting formaldehyde into major arteries of the deceased, until such point that the blood in the body is replaced by formaldehyde). Embalming began shortly after midnight, and concluded about 3 A.M.

>*\*Reconstruction\**: Reconstruction was not commenced until embalming was completed. He said Plaster-of-Paris was used to fill the empty cranium and provide the support necessary to reconstruct the head after autopsy. After the hardening agent dried the plaster in the cranium, he said that the scalp was pulled together and sutured into place. (A primary concern was avoidance of leakage.) He said he does not recall very much bone missing from the cranium, and said he does not recall that any scalp was totally missing. The hole in the cranium was noticed during reconstruction to be in the upper left posterior portion of the head. Gawler's closed the tracheotomy wound by "suturing it up." A small amount of dermal wax was used to seal the anterior throat wound after it was sutured. He does not recall whether the tracheotomy wound was above, or below, the collar line on a buttoned dress shirt. Restorative cosmetics were used by Gawler's to prepare the President for a possible open-casket funeral; they were cream-based, and were used to hide some bruising and discoloration on the face. The

President was dressed in a blue pin-stripe suit, and a white shirt: the clothing had been brought from the White House. He said Tom Robinson performed most of the repairs to the head, and said he would try to locate both Tom Robinson and John Van Hoesen on our behalf so that we could conduct interviews. He said that as a supervisor, he was in-and-out of the morgue during the embalming and reconstruction process, discussing various arrangements with John Gawler and Navy personnel, and was not privy to every step of the work taken by his people. He said that the Gawler's team completed the reconstruction work no later than 4:00 A.M., and that the new Mahogany casket was then loaded into a Navy ambulance by the Secret Service, i.e., "Kellerman and others," as a last act of respect for the fallen Commander-in-Chief. At that point, he said there was nothing to do but pack up the equipment and head back to Gawler's. In response to follow-on questioning about reconstruction, he said he could not recall any rubber or plastic sheet used to cover an open defect in the head. He said there was no visible damage to the head or scalp following reconstruction which would in any way have been indicative of the nature of the head wound(s). He does not recall, one way or another, whether any photographs were taken during Gawler's work on the President's body. He said that he personally closed the casket at Bethesda, and said the President was ready for an open-casket funeral, if one had been desired. He was asked whether there was any wrapping or bandage around the head after work was completed, and he said no.

#### >**\*\*Casket Issues\*\***

>Mr. Hagan said that he never saw any casket on the evening of November 22-23 other than the mahogany casket which Gawlers brought to the morgue in their own hearse. He did, however, indicate certain knowledge that the bronze Dallas casket was damaged. We asked him how he knew this, if the only casket he saw the night of the autopsy was the one Gawler's delivered. He responded by saying that some time after the autopsy (he was unsure exactly when), someone delivered the bronze Dallas casket to Gawlers funeral home; it was observed by him to have a damaged handle, and some scratches on the exterior surface. He was told GSA would pick it up later, and in fact said that GSA had done just that, during the spring of 1964, taking it away in a government truck. Hagan concluded by saying "none of our people were at the Naval Hospital early that evening, so I can't account for what happened to the casket or how it was damaged."

#### >**\*\*Gawler's Documents\*\***

>Mr. Hagan provided, in response to the subpoena he requested from the ARRB, a photocopy of the Gawler's document file on the services provided by them to the late President Kennedy. Much of the file consisted of newspaper and magazine clippings, and photocopies of book excerpts which some researchers had mailed to Mr. Hagan and asked him to comment on. He stressed that while he had spoken to groups over the years, when requested to, about the funeral arrangements for President Kennedy, he had only done so in a general way, and had never discussed the President's wounds with anyone, and that he had not responded to various researcher requests for his comments on the apparent Parkland vs. Bethesda wound controversy about which some independent researchers have written. He indicated an unwillingness to get involved in any controversy over how many caskets were at Bethesda Naval Hospital the night of the autopsy, and said he had no recollections which could bear on the matter.

>Summarized below are the essential business documents he gave us, and answers to ARRB's questions about those documents:

>-[Chronology of Events of November 22-25, 1963 entitled "Funeral Arrangements for John Fitzgerald Kennedy"]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md134.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md134.pdf)): Mr. Hagan did not think that he had prepared this summary of events himself, and said that John Gawler had probably prepared this document.

>-["Arrangements File"]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md130.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md130.pdf)): The reproduction of this multi-folding business document (the original was one long sheet of stiff paper or cardboard, with two vertical folds in it dividing it into 6 panels) consists of 6 photocopied pages. It contains basic descriptions of funeral arrangements, a page titled "Forwarding Directions," a page titled "Embalmer's Report," another titled "Personal Remarks," and one titled "Remarks." Re: the "Personal Remarks" page, Hagan said that the times "11:45" and "3:30" were his handwriting, and when asked to interpret the meaning of these entries, he said that 11:45 could refer to Gawler's start time (a little earlier than he had estimated earlier in the interview), and that 3:30 could refer to the time all of their work was concluded (also a little earlier than he had earlier recalled). He said the names listed on the "Remarks" page (O'Brien, O'Donnell, Powers, and O'Leary) are those Kennedy aides who visited Gawler to select the mahogany casket about 11:00 P.M. on 11/22/63. On the "Personal Remarks" page, the entry which reads "Wilbert Triune, 3000 lbs. with top, top only 900-1000" refers to the vault into which the casket was placed at burial in Arlington Cemetery; the entry which reads "Marsellus 710, 255 lbs" refers to the casket selected by the Kennedy family retainers who visited Gawler late on 11/22/63. On the page titled "Embalmer's Report," he said he made the decision at the time not to annotate or draw the President's wounds on the body chart, since a formal U.S. Navy post mortem examination was in progress, and he knew they would formally be documenting that information in much more detail.

[...]

>Summarized below are three business documents ARRB gave to Joe Hagan, all of which he said had been lost from Gawler's files, presumably due to some "inside job" (in which a Gawler's employee was suspected of having passed the originals to Kennedy assassination researchers)--Mr. Hagan was most happy to receive copies of these documents (which the ARRB had received from a member of the assassination research community), since he said they were no longer in Gawler's files:

>-["First Call Sheet"]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md129.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md129.pdf)): He recognized this one-page document, and said he saw his handwriting on several parts of it. He said it was his feeling that not all of the entries were made as events occurred, but rather, that some portions may have been completed 3 or 4 days after the fact. In the portion of the document titled "Casket Order," the handwritten entry found on the Remarks line which reads: "Body removed from metal shipping casket at USNH at Bethesda" was indeed his handwriting, but explained that he never did himself sight the object described here--he said he wrote this down simply because he was told the President's body had arrived in a metal casket, and did not know at the time that it was a bronze ceremonial casket, so simply described it as a shipping casket without having seen it because he was told it was "metal." In the section of this document called "Casket Delivery Details," he was surprised and at a loss for words when he sighted the "2 A.M." entry, because the entry led him to believe that his memory must have been incorrect about arriving with the Marsellus casket between 11:00 and midnight--ultimately, after considering this "2 A.M." entry, he said, "I can't put it all together."

[...]

>During the latter stages of the interview, it became apparent that Mr. Hagan was somewhat familiar with the assassination literature on the Kennedy assassination.

([ARRB MD 182]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md182.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md182.pdf)); [full audio unavailable, tape stored at the National Archives II building in College Park, Maryland] (<https://www.archives.gov/research/jfk/review-board/series-04.html>))

The statements of Joe Hagan, as well as William Manchester's 1967 book *\*The Death of a President\** and Jim Bishop's 1968 book *\*The Day Kennedy Was Shot\**, all indicate that the Gawler's funeral team arrived at Bethesda Hospital during the later stages of the autopsy. On the other hand, two other Gawler's morticians – Tom Robinson and John Van Hoesen – claimed they arrived during the early stages. Hagan did say, as the ARRB reported, "*that some members of the team (not including himself) may have gone out to Bethesda earlier in the evening in a private automobile, vice the hearse\**".

When the ARRB contacted Hagan on 6/18/1996, he relayed information from his colleague Tom Robinson, acknowledging the difference between their stories:

>He said he had just contacted Tom Robinson this morning previous to calling me, and said he thought Tom Robinson would be amenable to speaking with us. He said that Robinson had just told him that there was both bone and scalp missing from President Kennedy's head following completion of reconstruction, and that there were some small holes in his face caused by shrapnel, which he had plugged.

>Hagan also said that Robinson recalled going out to Bethesda with Hagan and the mahogany casket, well before the end of the autopsy, and that Robinson recalled sitting in the gallery for a considerable period of time and watching the autopsy in progress, prior to beginning the autopsy. Hagan quoted Robinson as saying that Ed Stroble and John Van Hoesen had come to Bethesda later in the evening with the portable embalming equipment.

([ARRB MD 182]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md182.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md182.pdf)))

From a report on Tom Robinson's 6/21/1996 interview by the ARRB:

>**\*\*Summary of the Meeting\*\***

>At ARRB's request, Mr. Robinson came to Washington this date for an interview with selected staff (see above for names of staff members).

>[Information provided below is a paraphrased summation of-both-questions and answers during this interview; only remarks in quotations are direct quotes of Mr. Robinson.]

>When asked to provide a chronology of basic events in which he was involved on November 22-23, 1963, Mr. Robinson recalled the following:

>-Came to work at Gawler's funeral home in Washington, D.C. about 4:00 in the afternoon on 11/22/63;

>-Everyone at Gawler's thought JFK's body would be coming to Gawler's. MDW had sent a military contingent to Gawler's funeral home...there were guards posted at every door.

>-About suppertime, the plans changed. Joe Hagan told Robinson to "get the House Grips...you're going to Navy." ("House grips" were defined by Mr. Robinson as portable embalming equipment.)

>-He and Joe Hagan drove from Gawler's to Bethesda at extremely high speed in the Gawler's hearse. They transported in the hearse the new casket selected by the Kennedy aides who had visited Gawlers, a Marcellus 710 model, made of plank mahogany. It was covered in an American flag when transported out to Bethesda.

>-Mr. Stroble and Mr. Van Hoesen drove out to Bethesda in another vehicle, with the portable embalming equipment ("house grips")...they may have arrived subsequent to Hagan and Robinson.

>-Robinson said that he and Hagan arrived "early" in the autopsy, prior to the chest incision being made, and just as the gross examination of the head was starting.

>-Work by the Gawlers team started "after midnight;"

>-Saw the President's body (in the Marcellus casket) leave Bethesda in the gray Navy ambulance before he left the premises himself.

>**\*\*Observations regarding the autopsy of President Kennedy:\*\***

[...]

>-He and Joe Hagan arrived "early in the autopsy," meaning that he knew it had not been underway long because the chest incision had not been made yet, and the gross examination of the head was just beginning.

>-Robinson said he had a "50 yard-line seat" at the autopsy, and was leaning on the rail with his arms, from his seat in the gallery. He said the President's head was to his right, which means that he was on the anatomical left of the President during the autopsy. He said that most of the pathologists and their assistants were opposite him, on the anatomical right of the President during the autopsy. The gallery observers were behind him in the gallery.

>-He said the amphitheater was practically filled--that there were way too many people in the morgue. At one point in the interview, he said the atmosphere was like a "cocktail party," and at another point he said the atmosphere in the morgue was "like a circus." When asked to specify what he meant by those descriptions, he said that there were people there who clearly had no business being there, and that there was continuous and loud discussion from the gallery which he thought was both improper, and distracting. He said that a federal agent (either Secret Service or FBI) took him aside during the autopsy (after the head examination was well underway) and offered to get him some coffee, knowing that he was upset. Robinson said that the agent told him that "it had to be this way" (in regard to having so many observers in the room), since there had to be "creditable witnesses" to the wounds observed and procedures performed during the autopsy, because the "world was watching."

[...]

>-Robinson said that he saw the brain removed from President Kennedy's body, and that a large percentage of it was gone "in the back," from the "medulla," and that the portion of the brain that was missing was about the size of a closed fist. He described the condition of the brain in this area as the consistency of "soup." He said that the brain was "not cut up" at the autopsy. When ARRB staff asked whether the brain was weighed at the autopsy, he said that "he was sure they did," but he had no specific recollection of that happening.

[...]

>-Removal of President's Brain: Robinson drew dotted lines on the drawing he executed of the posterior skull which shows the wound between the ears] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md88.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md88.pdf)). When asked by ARRB staff what the dotted lines represented, he said "saw cuts." He explained that some sawing was done to remove some bone before the brain could be removed, and then went on to describe what is a normal craniotomy procedure, saying that this procedure was performed on JFK. He seemed to remember the use of a saw, and the scalp being reflected forward.

[...]

>Embalming and reconstruction of the President's head:

>-Mr. Robinson said he worked right over the President for over 3 hours, but that he was NOT the person who reconstructed the President's head; he said that was done by John Van Hoesen. -Embalming was done before reconstruction.

[...]

>-Robinson said that there was considerable pressure on the Gawlers crew to finish their work as soon as possible, and that it was coming from an Admiral. He recalled becoming upset by this, and being calmed down by Joe Hagan; he recalled responding to one query about when they would be finished by saying, "You can't put on make-up with a barn brush!" He remembered with pride that someone else in the morgue said that the President "looked good" when they had finished their work, and Robinson reiterated at this point that an open casket funeral could have been held if the Kennedy family had desired one. When asked whether the pathologists stayed in the morgue during the embalming and reconstructive work, he said they did not.

>Fox Autopsy Photographs:

>-[Top of Head/Superior View of Cranium (corresponds to B&W #s 7-10)] (<https://imgur.com/a/x1gOnOP>): Robinson frowned, and said with apparent disagreement, "This makes it look like the wound was in the top of the head." He explained that the damage in this photograph was "what the doctors did," and explained that they cut this scalp open and reflected it back in order to remove bullet fragments (the fragments he had observed in a glass vial). ARRB staff members asked Robinson whether there was damage to the top of the head when he arrived at the morgue and before



the brain was removed; he replied by saying that this area was "all broken," but that it was not open like the wound in the back of the head.

[...]

>Gawlers Documents: -["First Call Sheet:"]

([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md129.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md129.pdf)) He has seen this document before; upon close examination, he recognized some of the handwriting as his own, specifically the sections labeled "dressing" and "remarks" at the top of the page. In the area near the bottom third of the page, ARRB staff asked him to describe what the entry "2 A.M." meant under "Casket Delivery Details." He said that the time "2 A.M. is "not right," i.e., incorrect, since he knows he and Joe Hagan arrived with the Marcellus casket early in the autopsy.

>-Regarding [the tripartite fold-out document reproduced in multiple photocopy pages]

([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md130.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md130.pdf)), Robinson said that the times of "11:45" and "3:30" under "Personal Remarks" look like they were written in Joe Hagan's handwriting. He said that the body chart on the page titled "Embalmer's Report" would normally have been filled in by Gawlers personnel, and he did not know why it was not filled in for President Kennedy.

([ARRB MD 180]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md180.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md180.pdf)); [full audio unavailable, tape stored at the National Archives II building in College Park, Maryland] (<https://www.archives.gov/research/jfk/review-board/series-04.html>))

From a report on John Van Hoesen's 9/25/1996 interview by the ARRB:

>**\*\*Summary of the Meeting\*\***

>Jeremy Gunn and Doug Horne traveled to Cobb Island, Maryland on 9/25/96 to interview John VanHoesen at his home. Although Mr. VanHoesen was most cordial, his memory of the events of November, 1963 was generally not sharp and was perhaps the least firm, and least detailed, of any of the medical witnesses ARRB has interviewed.

>Mr. VanHoesen (who pronounces his own name "VanHeusen") stated that he worked for Gawler's Funeral Home from June 1950-1987, when he retired at the age of 62 to care for his ailing wife. He described his duties at Gawler's in 1963 as those of a "service man," meaning that although he would assist with embalming when required, his primary duties were to ensure that the bodies of the deceased were properly dressed prior to funerals, and that details of each funeral service were arranged as desired by the customer.

>He first heard about the assassination of President Kennedy on television, and went home to eat his dinner. At the time he went home to eat he suspected he would be involved with the President's funeral preparations, but he was not sure. He said that only when he came back to work at about 6 P.M. on November 22, 1963, did he realize that Gawler's had been officially tasked to prepare President Kennedy for burial. He said that he went to Bethesda Naval Hospital in a vehicle with Joe Gawler, and that they carried part of the portable embalming equipment with them in their vehicle. When asked whether Tom Robinson was in his vehicle, he said he did not think so. He verified that part of the portable equipment was in another vehicle. He said that he would estimate he and Joe Gawler arrived at Bethesda about 7:30 P.M. on November 22nd. [...]

[...]

>Initially, upon arrival, he said that he and Mr. Gawler waited in the anteroom where the cold boxes were, but that after a wait they were admitted into the morgue proper. He assumed that the reason he and Mr. Gawler had to wait in the anteroom (where the chill boxes were) was because initially, no one knew who they were, or why they were there. He said that there were three tiers of benches in the morgue gallery, and that he sat on the back bench in the gallery. When asked whether he sat with Tom Robinson, he said that he did not think so.

>Mr. VanHoesen said that he and Joe Gawler went into the morgue proper around 8:00, before any of the normal autopsy procedures had begun. When specifically asked whether any incisions had been made yet, he said "no." He said that initially, several people were crowded around the autopsy table examining the body, and in this connection he vaguely recalled discussions regarding whether or not a full autopsy was really necessary. He said he could not recall the appearance of President Kennedy's head wounds at the beginning of the autopsy, and had a hard time seeing what was happening during the course of the autopsy, because of the number of people crowded around the table directly involved in the autopsy procedures, but that he was present when the autopsy proper (incisions) actually began. Mr. VanHoesen independently recalled that the President's body had arrived in a black, zippered, "plastic pouch" inside a casket. Initially, when he recounted this memory, he said he actually saw the President's body removed from this black, plastic pouch and placed on the autopsy table. During subsequent questioning about this recollection, he confirmed that what he saw was a body bag, and that it was made of plastic, not cloth. Upon further discussion, he said he was not sure whether he actually saw the body removed from the body bag, or saw the body on the table immediately after it had been removed; in any case, he was firm about his recollection of seeing a black, zippered body bag inside the President's casket, and was of the definite opinion that President Kennedy's body had been inside the body bag. When asked whether the body was nude when removed, or wrapped in sheets, he said he thought it was wrapped in sheets, or partially wrapped in sheets, but was much less sure of this recollection than he was of the presence of a black body bag, which he seemed to confidently recall.

[...]

>He recalled that the Gawler's team (Mr. Hagan, Mr. Stroble, Mr. Robinson, and himself) began its work about midnight. He could not remember anything about the condition of the President's head at the beginning of the embalming process, nor could he remember anything, one way or another, about any wounds on the back (posterior) of the President's body: in response to this question, he said, "I'm not sure we ever turned the body over." He could not remember, one way or another, whether photographs were taken during the embalming and reconstruction process. When asked what his role was during the embalming process, Mr. VanHoesen said that he worked on the body cavity, and on the legs, and that he did not work on anything above the neck. He said that work on the body cavity

included removal of all organs from the thoracic and abdominal cavity, preserving them in a bucket of formaldehyde, placing them in a plastic bag, and returning them to the body cavity inside plastic. He said that he stitched up the body cavity following completion of this process. He said that Mr. Stroble (who is now deceased) performed the reconstruction of the President's head, not him. Mr. VanHoesen described Mr. Hagan as the Services Manager, described himself as the assistant Services Manager, described Tom Robinson as an Arrangements Man, and described Mr. Ed Stroble as a full-time embalmer. The persons who directly participated in embalming, reconstruction, and preparation for burial ("hands on" participation) were Stroble, Robinson and himself. [...]

[...]

>At the conclusion of the embalming process, the President's body was wrapped in plastic, and then dressed in clothes which had been brought to the morgue from elsewhere. He said that the damaged area in the back of the Presidents head was not visible as the President lay supine in the casket, and that it was covered by the pillow which the President's head was resting on.

([ARRB MD 181]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md181.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md181.pdf)); [full audio unavailable, tape stored at the National Archives II building in College Park, Maryland] (<https://www.archives.gov/research/jfk/review-board/series-04.html>))

Despite the differences in their timelines, all three Gawler's staff who were interviewed - Hagan, Robinson, and Hoesen - agreed they had time to view some of the autopsy. The restoration did not begin as soon as they were admitted into the room. This refutes the implied meaning of the passage in Sibert and O'Neill's 11/26/1963 FBI report "*At the termination of the autopsy, the following personnel from Gawler's Funeral Home entered the autopsy room to prepare the President's body for burial*" ([WC D 7, p. 280](<https://www.maryferrell.org/showDoc.html?docId=10408#relPageId=287&tab=page>)), and their 6/29/1966 memo which said "*the body had been turned over to members of the Gawler Funeral Home, who appeared following the completion of the autopsy*" ([ARRB MD 157]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md157.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md157.pdf))).

### **\*\*More witnesses time the end of the body examination\*\***

From the 11/29/1963 written statement of Secret Service Agent Roy Kellerman:

>During the night Joseph Gawlers Sons, Inc., funeral directors, were notified by Robert Kennedy and Sargent Shriver and a new coffin was obtained. After the completion of the autopsy and before the embalming I summoned SA Hill down to the morgue to view the body and to witness the damage of the gunshot wounds. The embalming was performed after the autopsy by the staff of Joseph Gawlers.

>Prior to our departure from the Naval Hospital I received all film, x-rays, that were used during this autopsy, and upon arrival at the White House I turned them over to SAIC Bouck.

>We left the hospital at 3:56 a.m. in the Navy ambulance and with police escort motored to the White House. Mrs. Kennedy and Robert Kennedy rode in the hearse, SA Greer drove, Kellerman in the front seat, SAs Hill and Landis with members of the family rode in cars following the ambulance. We arrived

at the White House at 4:24 a.m. The body was placed in the East Room.

([WC D 3, p. 77](<https://www.maryferrell.org/showDoc.html?docId=10404#relPageId=152&tab=page>))

The 11/30/1963 statement of Secret Service Agent Clint Hill gives a time for when he was summoned by Kellerman:

>[...] The President's body was taken to the morgue at the hospital, accompanied by ASAIC Kellerman, SA Greer, and Admiral Burkley, for an autopsy. SA Landis and I secured the 17th Floor of the hospital and remained there with Mrs. Kennedy. We established a communications system with the White House and handled all telephone calls both incoming and outgoing, screening each and every call. Any person attempting to reach the 17th Floor was also screened.

>At approximately 2:45 a.m., November 23, I was requested by ASAIC Kellerman to come to the morgue to once again view the body. When I arrived the autopsy had been completed and ASAIC Kellerman, SA Greer, General McHugh and I viewed the wounds. I observed a wound about six inches down from the neckline on the back just to the right of the spinal column. I observed another wound on the right rear portion of the skull. Attendants of the Joseph Gawler Mortuary were at this time preparing the body for placement in the casket. A new casket had been obtained from Gawler Mortuary in which the body was to be placed.

([WC Vol. 18, p. 744](<https://www.maryferrell.org/showDoc.html?docId=1135#relPageId=758&tab=page>))

If Kellerman is correct in saying he asked Clint Hill to inspect Kennedy's body "*After the completion of the autopsy and before the embalming*", then Hill's "*approximately 2:45 a.m.*" is the latest time estimated for the end of the examination. Placing the end of the examination as late as 2:45 AM would only allow about an hour for the body to be totally prepared for burial by about 4:00 AM.. According to [Funerals360.com]([https://www.funerals360.com/blog/burial/the\\_truth\\_about\\_embalming/#how-long-does-the-embalming-take](https://www.funerals360.com/blog/burial/the_truth_about_embalming/#how-long-does-the-embalming-take)), "*A typical embalming takes 45 minutes to an hour to complete*". It is not known how long it would have taken to restore the appearance of the head, but both tasks could have occurred at the same time.

Kellerman said in his 3/9/1964 Warren Commission testimony "*The only other time that I was absent was when the autopsy was about completed before the funeral directors were in, and it was my decision to get Mr. Hill down and view this man for all the damage that was done; so I went up to the floor where they were at and brought him down and he inspected the incisions*", "*We left the hospital for the White House at 3:56 in the morning*". When asked "*Did the autopsy last all that time?*", Kellerman replied "*No. They were going to give these people a couple of hours that they worked on them*" ([WC Vol. 2, p. 61]

([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Kellerman.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Kellerman.pdf)) [[text]

(<http://mcadams.posc.mu.edu/russ/testimony/kellerman.htm>)). Jim Bishop's 1968 book *The Day*

*Kennedy Was Shot* also described this event taking place before the restoration: "*The show was over.*

*The audience had dissipated. Roy Kellerman phoned Clint Hill on the seventeenth floor. "Come on down," he said. "I want you to look at these wounds." The Gawler group arrived. Joseph Hagan introduced himself and his assistants to a Navy enlisted man. For the embalming, he had Mr. John Van Haesen, Mr. Edwin Stroble, and Mr. Thomas Robinson. They would not begin their labors until the autopsy team signified that its work had been completed\**, *"\*In the autopsy room, the sheet was removed from the President's body, and Kellerman ordered Clint Hill to make his observations\**", *"\*He was sent back to the Kennedy suite to stand guard and to file a personal report\**", *"\*The three men were replaced by four. The function of the new men was to restore John Fitzgerald Kennedy to an approximation of serene sleep\**".

Lead autopsy pathologist Dr. James Humes was asked in his 3/16/1964 Warren Commission testimony *"\*What time did this autopsy end?\**", and he replied *"\*At approximately 11 p.m.\*"*, but later said *"...\*some time later on that evening or very early the next morning while we were all still engaged in continuing our examination, I was presented with three portions of bone which had been brought to Washington from Dallas by the agents of the Federal Bureau of Investigation\**". Humes mentioned once more *"\*The examination was concluded approximately at 11 o'clock\*..."* ([WC Vol. 2, p. 347] ([https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2\\_Humes.pdf](https://history-matters.com/archive/jfk/wc/wcvols/wh2/pdf/WH2_Humes.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/humes.htm>))]).

Autopsy assistant Dr. Pierre Finck's 1/25/1965-2/1/1965 report on the autopsy to General Bumberg said *"\*close to midnight, portions of the cranial vault are received from DALLAS, Texas\**", *"\*Three civilian embalmers from GAWLER FUNERAL HOME prepared the body for burial. It took four hours to clean, embalm and dress the body of the president. The cadaver left the Naval Hospital at 0400 hours, 23 November 1963\*..."* ([ARRB MD 28] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md28.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md28.pdf))).

Into the 1970's and onward, witnesses still tried to recall a timeframe for the resolution of the autopsy.

When Dr. Humes and assistant Dr. J. Thornton Boswell were interviewed together on 8/10/1977 by the House Select Committee on Assassinations, they were asked when they remembered a skull fragment being delivered to the morgue, to which Humes replied *"...\*later on that evening; and the time, as you imagine, I wouldn't wish to guess, but I would have guessed it was midnight or 1 o'clock in the morning, Jay, something like that\**" ([HSCA Vol. 7, p. 243] ([https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA\\_Vol7\\_M59Ia\\_HumesBosw.pdf](https://www.history-matters.com/archive/jfk/hasca/reportvols/vol7/pdf/HSCA_Vol7_M59Ia_HumesBosw.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/jfkinfo/hscv7f.htm>)] [[audio] ([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_HumesBoswell.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_HumesBoswell.htm)))]).

In Dr. Finck's 3/11/1978 testimony to the HSCA, when asked *"...\*when was the autopsy itself over as best you recollect, the actual process of carrying out the autopsy?\**", he replied *"\*Close to midnight, before midnight, and our departure after midnight. Maybe several hours after midnight for our departure\**" ([ARRB MD 30] ([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md30.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md30.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/finckhsca.htm>)] [[audio] ([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_Finck\\_311.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_Finck_311.htm)))]).

X-ray technician John Ebersole told Lancaster Intelligencer-Journal reporter Gil Dulaney on 3/9/1978 "*Later on in the evening, between midnight and 1:00 A.M., a large portion of the skull was sent up from Dallas\*...*" (*Best Evidence: Disguise and Deception in the Assassination of John F. Kennedy\** by David S. Lifton, 1980). Ebersole said in his 3/11/1978 HSCA testimony "...*The only function that I had was later in the evening, early in the morning, perhaps about twelve thirty a large fragment of the occipital bone was received from Dallas and at Dr. Finck's request I X-rayed these\**", "...*maybe midnight to one o'clock when these fragments arrived from Dallas\**", "*The autopsy was still going on during that period\**". He also said "*I believe by ten or ten thirty approximately a communication had been established with Dallas\*...*", "*I must say these times are approximate but I would say in the range of ten to eleven p.m....\**", "*or later\**" ([ARRB MD 60]([https://www.history-matters.com/archive/jfk/arrb/master\\_med\\_set/pdf/md60.pdf](https://www.history-matters.com/archive/jfk/arrb/master_med_set/pdf/md60.pdf)) [[text] (<http://mcadams.posc.mu.edu/russ/testimony/ebersole.htm>)] [[audio] ([https://history-matters.com/archive/jfk/hasca/med\\_testimony/audio/HSCA\\_Ebersole.htm](https://history-matters.com/archive/jfk/hasca/med_testimony/audio/HSCA_Ebersole.htm))]).

A HSCA report on a 4/25/1978 interview with autopsy witness Dr. Chester Boyers reads "*During the autopsy Colonel Finck of the U.S. Army arrived. At this point Mr. Boyers also mentioned that the mortuary arrived at approximately 1:00 or 2:00 in the morning\**" (HSCA 180-10102-10406; 180-10105-10398; 1012010362 [[text](<http://www.kenrahn.com/Marsh/HSCA/BOYERS.TXT>)]).

John Ebersole was later interviewed by Art Smith of *The Continuing Inquiry\** newsletter. As written on [the 7/22/1978 issue](<http://digitalcollections.baylor.edu/cdm/ref/collection/po-jones/id/1854>): "*His x-rays of the body were to try and find any bullet that had lodged itself within the body. He took two sets of x-rays; one at approx- imately 8:30 - 9:00 and another set around 1:00 a.m. On 11/23/63. He has stated that no missile could be found from these x-rays. This process took approximately 15-20 minutes each time\**", "*Dr. Ebersole also mentioned that three bone fragments had been flown up separately to Bethesda approximately 12:00 midnight and he was told to x-ray these\*...*", "*He did say that "three fragments of skull up from Dallas that evening and he x- rayed them approximately between 12:30 and 1:00 a.m. On 11/23/63\**".

Dr. Humes was asked in his 9/7/1978 HSCA testimony "*About what time of the night was the autopsy finally concluded?\**", and replied "*Oh, I would estimate around midnight\**", and later explained that "*after about midnight of that night\**" he never again examined the x-rays "*until a year or two after the Warren Commission\**" ([HSCA Vol. 1, p. 323] ([https://history-matters.com/archive/jfk/hasca/reportvols/vol1/pdf/HSCA\\_Vol1\\_0907\\_7\\_Humes.pdf](https://history-matters.com/archive/jfk/hasca/reportvols/vol1/pdf/HSCA_Vol1_0907_7_Humes.pdf)) [[text]([http://mcadams.posc.mu.edu/russ/m\\_j\\_russ/hscahume.htm](http://mcadams.posc.mu.edu/russ/m_j_russ/hscahume.htm))]).

## **\*\*Conclusions\*\***

The autopsy pathologists Dr. James Humes, Dr. J. Thornton Boswell, and Dr. Pierre Finck most likely did not admit their full knowledge of the wounds in Kennedy's torso.

The pathologists were almost certainly aware that the defect in the throat represented a former gunshot prior to Humes calling Parkland Hospital's Dr. Malcolm Perry.

Dr. Perry was most likely called during the later stages of the body examination, not the day after like the pathologists tried claiming.

The evidence suggests that the examination continued some time after FBI agents James Sibert and Francis X. O'Neill left the morgue.