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Dr. EARL FORREST ROSE, Medical Examiner, Parkland Memorial Hospital, telephone ME 1-5050, Extension 301, advised he resides at 10219 Lakemere Drive, Dallas, Texas, where his telephone number is DIamond 8-2043.

Dr. ROSE produced a Pathology Laboratory report on Autopsy

"There are four entrance types of wounds. No. 1 is $4\ 3/4$ inches from the top of the head and $3\ 3/4$ inches to the right of the midline. This measures $3/8\ x\ 1/4$ inch and is surrounded by a contusion ring. No powder tattooing is noted at the margins.

"Wound No. 2 is 17 inches from the top of the head on the right chest. It is 4 inches to the right of the midline, above and slightly medial to the right nipple. It measures $3/8 \times 1/4$ of an inch, surrounded by bruising. There is also a contusion ring.

"Wound No. 3 is 21 inches from the top of the head, along the anterior lateral side of the right chest and is 6 inches to the right of the midline. This measures $5/16 \times 1/4$ of an inch and is surrounded by a contusion ring.

"Wound No. 4 on the left chest is $20\frac{1}{2}$ inches from the top of the head, $1\frac{1}{2}$ inches to the left of the midline. The wound measures $3/4 \times 3/8$ of an inch, is transverse and surrounding this is a $1/4 \times 3/4$ inch abrasion.

"There is tanning of the arms. On the left arm there is a tattoo being "Tippit". On the dorsum of the left hand there is a crusted abraded area massuring & x & inch and a fresh abraded area on the dorsum of the right hand which measures & x & inch. The nails are quite well cared for although slightly dirty. Scar about the left knee, runs in an oblique fashion, crosses to the medial aspect of the knee, terminates on the leg measuring 7 inches. Poorly defined & inch inoculation type of scar on the left deltoid region.

"16½ inches from the top of the head, 3/4 of an inch to the right of the midline of the back in the subcutaneous tissue a missile is recovered from this region. This is associated with the Wound No. 3.

"INCISIONS: The standard "Y" thoracoabdominal and intermastoid incisions are utilized. Examination of the wound of the right temple is made. It is found to enter in the right middle cranial fossa, pursues a course which is slightly upward, backward and to the left. There is fracturing about the entrance and extensive fractures as it strikes the left occipitoparietal bone. It is recovered in this region, 3 inches to the left of the midline and approximately 1 inch from the top of the head. Examination of the brain is made. The brain weighs 1350 gm. The course of the missile through the brain is followed. It is found to enter the right temporal lobe, coursed through the brain transecting the brain stem, severing the cerebral peduncles surrounded by extensive hemorrhage, and found to exit from the brain substance in the calcarine gyrus to the left of the midline. There are penetrations of the meninges in the regions described. Examination of the brain is otherwise not remarkable.

"The abdominal panniculus measures up to 7/8 of an inch. The organs are in the normal position. Examination of the serous cavities is made. There is found to be extensive peritoneal hemorrhage, approximately 300 cc. In the right pleural space there is in excess of 1000 cc. of blood.

"THE COURSES OF THE MISSILES ARE FOLLOWED. The wound described as No. 2 is found to go between the second and third rib. The missile is found to penetrate the anterior edge of the right upper lobe. The bullet is found to go into the pericardial sac, there is extensive hemorrhage in the pericardial sac, approximately 4 ounces. Passes through the superior vena cava. It exits into the mediastinum, strikes the fourth thoracic vertebra to the left of the midline, courses in the substance of the vertebra and is recovered slightly to the left of the vertebra approximately 16 inches from the top of the head, having pursued a course very slightly upward, to the left, and backwards.

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"Wound No. 3 is found to penetrate the chast wall as externally discribed, is surrounded by hemorrhage, notching the dorsum of the sixth rib slightly lateral to the costochondral junction. It penetrates the anterior edge of the right lower lobe of the lung, the diaphragm, penetrates the liver, the entrance wound to the liver and laceration which is approximately 3 x 2.5 cm. It pursues a course backward, upward, and to the left and is recovered from the soft tissue of the back, 16½ inches from the top of the head and 3/4 of an inch to the right of the midline. In its course it is also found to again penetrate the disphragm after going through the liver and penetrates the posterior aspect of the right lower lobe.

"Wound No. 4 is examined. It is found to be superficial and no penetration of the rib cage is noted. There is hemorrhage beneath the abraded and bruised area adjacent to the wound. No missiles are present in this area.

"LUNGS: The lungs together weigh 1200 gm. The penetrations of the lung have previously been described. There are areas of atelectasis and along the courses of the bullet through the lung there is extensive hemorrhage.

"LIVER: The liver weighs 1670 gm. The penetrations of the liver have previously been described. The cut surface of the liver is not remarkable."

"GALLBLADDER & BILLARY TREE: Not remarkable.

"PORTACAVAL SYSTEM: Not remarkable.

"KIDNEYS: The kidneys together weigh 350 gm. The capsule strips quite easily and they are pale.

"ADRENALS: Not remarkable.

"SPLEEN: The spleen weight 100 gm. The capsule is smooth. The cut surface is not remarkable.

"HEART: The heart weighs 320 gm. There is an epicardial ecchymosis, anterior surface, left ventricle. This is at the apex. The coronary arteries are opened in situ. They are found to be of good caliber, free of occlusions. The valves are not remarkable. The myocardium grossly is not remarkable.

"PANCREAS: Not remarkable.

"INTESTINAL TRACT: The stomach contains partially digested food, approximately 5 ounces. The duodenum is not remarkable. The small and large bowel are not remarkable. The appendix is present.

"MUSCULO-SKELETAL SYSTEM: The musculo-skeletal system is not remarkable except for the previously described bullet injuries.

"LYMPHATICS: Not remarkable.

"MICROSCOPIC:

"Brain: There is disruption of brain tissue with fresh hemorrhagic extravasations.

"Liver: There is disruption with fresh hemorrhages. No inflammation or organization. Otherwise not remarkable.

"Kidney: Non-contributory.

"Pancreas: Non-contributory.

"Lung: There is disruption of the parenchyma with fresh hemorrhages.

"Adrenal: Non-contributory.

"Skin: Sections of skin show disruption with hemorrhages.

There is no inflammation or organization.

"Meart: Non-contributory.

"FINDINGS:

"Gunshe't wound to the head.

"Brain parenchymal damage and hemorrhage.

"Gunshot wounds of the chest.

"Penetrations of the right lung, superior yens cava, and liver.

"Right hemotherax.

"Peritoneal hemorrhage.

"Pericardial hemorrhage with cardiac tamponade.

"CAUSE OF DEATH:

"Gunshot wounds of the head and chest.

"/s/ EARL F. ROSE, M.D.

EARL F. ROSE, M.D."

In addition to the report from Pathology Laboratory, he furnished five other pages of material concerning the Laboratory findings. These pages are being reproduced by Xerox and are as follows:

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TOXICOLOGIC .L MAPORT

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X-rays made: Yes. No.

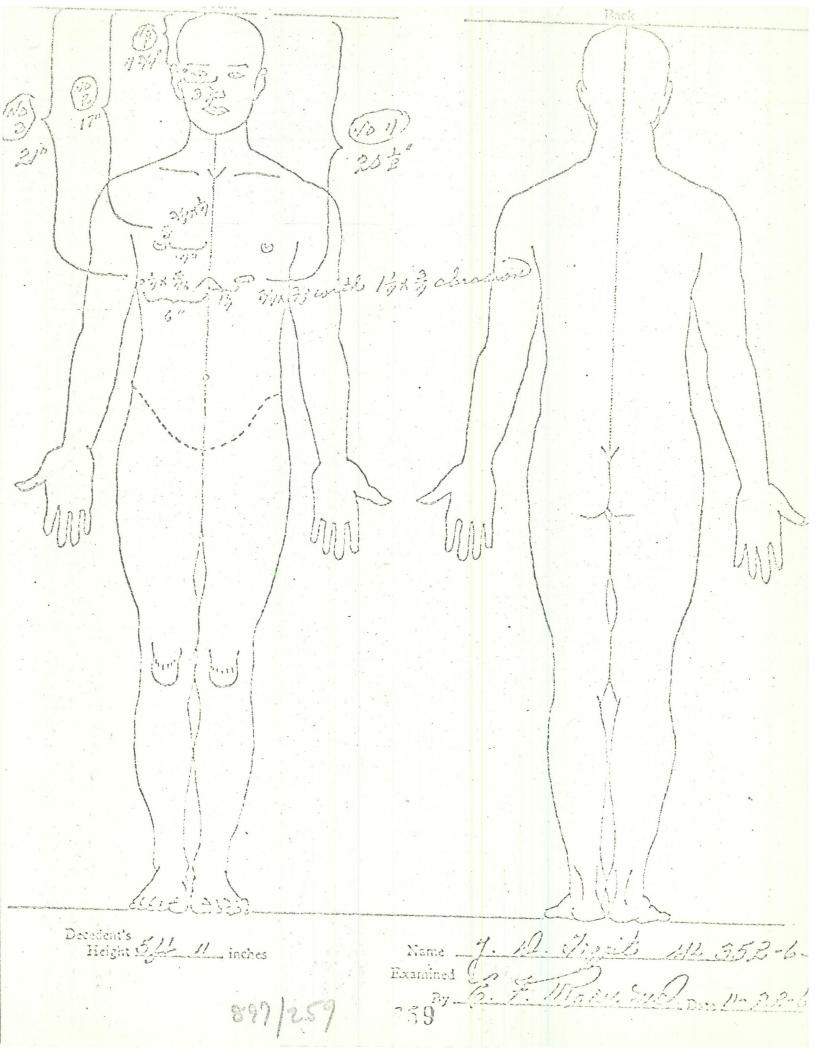
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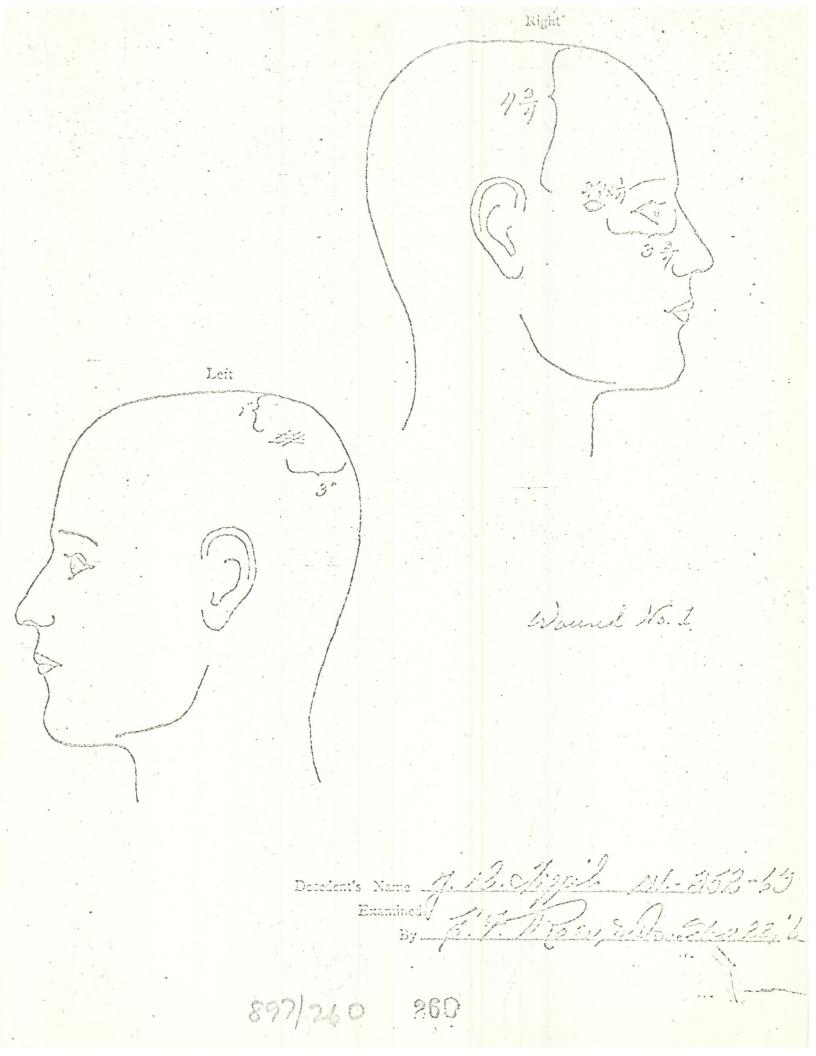
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Dr. ROSE said the foregoing material might be used for any purpose it may serve in the investigation being conducted by the FBI in this case.

He said he recovered three bullets from Patrolman J. D. TIPPIT's body and that hearsay had it that one bullet was removed from TIPPIT's body while his body was at Methodist Memorial Hospital in Dallas, Texas, before the body was brought to the morgue at Parkland Memorial Hospital.

He noted that the numerical identification of external wounds which are mentioned in his autopsy reports do not necessarily mean the sequence of occurrence. The numbers are arbitrary and were used for identification purposes so development of the autopsy material might be historically and chronologically followed in the report and studies of the death of Patrolman J. D. TIPPIT.

He also noted that the entry and exit sketch of a head wound on which the exit is "cross-hatched" merely indicates the area where the projectile was located. Dr. ROSE indicated the projectile did not exit. He said he removed it surgically.

He further advised that all projectiles were turned over to Datective FRANK J. CORKERY, 'ID 366," of the Dallas Police Department on November 22, 1963, after the autopsy was completed. The clothing and personal effects belonging to Patrolman TIPPIT were turned over to the Dallas County Crime Laboratory at Parkland Memorial Hospital and Dr. ROSE advised a copy of the Crime Laboratory's report was sent to the Dallas Police Department.

He also furnished five Folaroid prints, two of which show the entrance wound in the right side of the head of Patrolman TIPPIT and the other three showing the body wounds in the upper body of Patrolman TIPPIT. He requested these be returned to him when they had served their purpose.