

DID RUDDY.

Finally, I have discovered that there are far more documents related to the Winnipeg Airport Incident than the 13 which were sent to me as a result of my FOIPA application (you can obtain a summary of each on the ARRB website by inputting "Giesbrecht" or "Giesbright"). Numerous other documents (some of which might be duplicates) require inputting another term shuch as "Townhouse Motor Hotel", "Winnipeg", "Backlin" (Giesbrecht's lawyer), "Ewald Carlson" (the FBI SAC in Minneapolis), or "105-8255- 2318" (the file # of the original six-page report). I am in the process of ordering the remainder and will report on my findings in a future update.

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ON THE MYSTERIES OF IFK'S AUTOPSY **EVIDENCE** by Gary L. Aguilar, M.D.

The best I can figure it, one illuminating aspect of the recent flap between Hal Verb and Jim Fetzer (Fourth Decade, July 1998) involves what I believe is Verb's misunderstanding of our - Noel Twyman's and my -position on JFK's head wound. And as best as I can figure Verb's and Twyman's positions on the question of JFK's fatal skull wound versus the autopsy photographs, I don't think I agree with either one of them entirely.

HAL VERB'S MISUNDERSTANDING;

OPENING A FASCINATING WINDOW

In Verb's latest response to Fetzer, he states that witnesses to JFK's skull wound said it was right-sided, but not rearward. This flap began in Verb's January, 1998 Fourth Decade review of both Twyman's and Fetzer's books. In that review, ironically, Verb quotes witness statements the wound was both right and rearward. In his latest salvo at Fetzer (Fourth Decade, July 1998, p.23-33.) Verb mentioned a compilation of eyewitness statements I'd assembled describing JFK's wounds. Pertaining to the latter, he wrote, "I last confronted Dr. Aguilar in San Francisco at the mini-conference on JFK and pointed to the four doctors mentioned in my Fourth Decade article - Kemp Clark, MD, Marion T. Jenkins, MD, Charles Carrico, MD and Robert McClelland, MD (Verb, Fourth Decade, January, 1998) - and asked if the four doctors were included in his collation (of witnesses who said JFK had a rear skull defect) and he replied "Yes, they are." These four indicated a 'right side' injury ~ a 'back' one and I did not guery Aguilar about the additional ones I have now included."

The "additional ones now included" Verb named as: Gene Akins, MD (sic), John Ebersole, MD, Gail Rudnicki, Charles Baxter, and Francis X. O'Neill, all of whom I included in my compilation and counted as "rear" witnesses. He also mentioned "Stewart" and "Altgens", who I did not number among those who described a rearward skull defect. (Altgens did not give a meaningful description of JFK's head wound, and I have no record of what Stewart said.) I assume, though, that Verb meant

Gary L. Aguilar, MD 909 Hyde St. #530 San Francisco CA 94010 to suggest that these "additional ones now included" - also had indicated JFK had a right-sided skull wound, not a back one. He did not cite their statements or testimonies, however.

Verb's apparent intent was to disprove a position he credits to Twyman, and perhaps Fetzer and me as well. He describes "our" take on the 'witnesses-vs.-JFK's-skullwound' controversy thusly: "(M)any witnesses are reported as having seen the back of JFK's head completely blown out and these witnesses include not only assassination witnesses but doctors and nurses who attended both Kennedy's arrival and Parkland Hospital and the subsequent autopsy ... And, as the argument continues, if so many did report this, why is it that film evidence (including the Zapruder film and the autopsy photographs and x-rays) (sic) do not show this?" Rhetorically, he asks: "But is it true that witnesses did state that they viewed the back of the head 'completely blown out'?" (Review of Bloody Treason by Hal Verb. In: Fourth Decade. 1/98, p.16.)

I consider Verb a personal friend, and we often see eye-to-eye. When this controversy was brought to my attention, I called him. Verb told me that Twyman posited that the "whole back of JFK's head was blown out." I told Verb I had not noted that particular expression in the book, so Verb promised to find the passage for me. Four days later I called back, and Verb apologized that he'd looked, and couldn't find it. Graciously, he admitted that he had probably been in error. (In fact, in his book on page 18 Twyman describes the wound as "the large wound was mainly on the top right and rear of the skull.") Verb maintained, however, that he was nevertheless certain that it was indeed Twyman's belief that the whole back of JFK's head was blown out, and I would learn that from Twyman if I called him.

I did. Twyman told me that it was not his belief nor has he ever argued, that the "whole back of JFK's head was blown out." In fact Twyman claimed, by his having featured Parkland physician statements prominently, especially Robert McClelland's, he had hoped to leave readers with the impression that the "right-rear skull defect" description was the most credible. On page 191-192 Twyman listed the same physicians Verb cited in his January, 1998 review.

To clarify the issues, it may be useful to cite the relevant witnesses's statements. The earliest, and therefore most likely reliable, statements of the witnesses that both Twyman and Verb cited are as follows:

Kemp Clark, MD: In an undated note, apparently written on 11/22/63 at Parkland Hospital and reproduced in Commission Exhibit #392, neurosurgery professor Kemp Clark described the President's skull wound as, "...in the occipital region of the skull...There was a large wound in the right occipitoparietal region ... There was a large wound beginning in the right occiput extending into the parietal region ..."

Robert McClelland, MD: His first recorded skull wound description occurred during his Warren Commission testimony. His oft-repeated description was, "I noted that the right posterior portion of the skull had been extremely blasted." (6H33)

Marion Thomas Jenkins, MD: In an 11/22/63 note reproduced in CE #392, he wrote, "a great laceration on the right side of the head (temporal and occipital) (sic), causing a great defect in the skull plate to the extent that the cerebellum had protruded from the wound."

Charles James Carrico, MD: He described having seen cerebellar tissue in his hand-written note reproduced in CE 392, but was otherwise not very specific. But he told the Warren Commission that JFK had a "defect in the posterior skull, the occipital region." (3H361)

The relevant statements of the additional witnesses Verb named in his July, 1998 *Fourth Decade* article, and who he implied were also 'right side injury not back ones,' include:

Gene Aikin, MD: As far as I know, his first recorded description of JFK's skull wound occurred during Warren Commission testimony. He said, "The back of the right occipitalparietal portion of his head was shattered with brain substance extruding." (6H65) He later opined, "I assume the right occipitalparietal region was the exit, so to speak, that he had probably been hit on the other side of the head, or at least tangentially in the back of the head..." (6H67)

Charles Rufus Baxter, MD: In a hand-written, 11/22/63 note published in the Warren Report he wrote, "...the right temporal and occipital bones were missing...." (WR 523)

Jan Gail Rudnicki: He was a lab assistant on the night of the autopsy. He was officially interviewed for the first time by the HSCA's Mark Flanagan, who claimed that Rudnicki had told him the "back-right quadrant of the head was missing." (HSCA rec. # 180-10105-10397, agency file number # 014461, p.2.)

John Ebersole, MD: The autopsy radiologist, Ebersole, was first interviewed about JFK's wound by reporter Gil

Dulaney, who quoted Ebersole to say, "... there was a very obvious horrible gaping wound to the back of the head." (In: David Lifton, **Best Evidence**, p.543) Two days later Ebersole was interviewed by the HSCA. Before he was shown the autopsy images he said, "The back of the head was missing..." (HSCA interview with Ebersole, 3-11-78, p.3) After being shown the autopsy images, he waffled.

Verb may have had a reason to believe the witnesses said side, and not back: the autopsy photographs and the Zapruder film show a right side injury, not a back one. The witnesses, however, don't back them up. I believe Verb is thus incorrect to claim these witnesses described a "right side" injury not a "back" one. My reading of their statements, and Twyman's as well, is that these witnesses (and over 20 others) described a rightrearward defect - back, first and foremost, involving also the right side. The tempest in this teapot seems to be Verb's misunderstanding of "our" view - that our comments about its being rearward implied we excluded its also involving the right side. However, this is not to say I agree entirely with Twyman on the autopsy photographs-versus-witnesses question, either. In fact, on that score Twyman and Verb may be in the same camp.

On page 231 of Bloody Treason, Twyman writes, "In the previous chapter we established that the head wound photo is authentic, and that it is consistent with the description of the head wound by both Dr. Humes and Dr. Boswell at the autopsy, and that it is consistent with the description of the head wound described by Paul O'Connor." I don't think Twyman performed any recognized photographic authentication tests. Twyman's authentication seems to rest on his understanding of the pathologists' description of the skull wound as "parietotemporooccipital," and his understanding of Paul O'Connor's statements. Verb, apparently, agrees with Twyman on not only the authenticity of the autopsy images, but also that witness statements are not inconsistent with them. I don't agree. Ignoring the question of photographic authenticity for the moment, one can't describe Humes' or Boswell's or O'Connor's statements (or virtually any others') as particularly consistent with the photos. It would be easier to argue the contrary.

For example, Twyman cited his interview with O'Connor, in which O'Connor described the wound as: "It went from above the hairline on the right side through the parietal and the occipital area and down and around to the right temporal area of the skull."

Twyman: "Can you recall how close it came to the hairline in the back of the head?"

O'Connor: "Maybe an inch and a half." I don't see a defect anywhere in the scalp behind JFK's right ear, to say nothing of seeing one within an inch of the hairline in the back.

Despite this exchange that seems to undermine the photographs, Twyman was not the only person to elicit such statements from O'Connor. Groden and Livingstone reported, "O'Connor was shown the autopsy photographs and he said, 'No, that doesn't look like what I saw... A lot worse wound extended way back here, and he demonstrated with his hand to the back of the head." (Groden and Livingston, High Treason, p.451) For Sylvia Chase's KRON television special on JFK, O'Connor described the wound as an "open area all the way across to the rear of the brain just like that", and with both hands O'Connor demonstrated a defect from just behind the right hairline anteriorly to the bottom right rear area of the skull. On page 87 of The Killing of the President, Groden has reproduced a diagram O'Connor prepared showing a fore-to-aft channel through JFK's skull, consistent with his comment that the defect was low enough in the rear to be near the hairline. And on p.88, Groden shows a photograph of O'Connor holding his hand over the bottom right rear of his head, quoting O'Connor to say, "[There was] an open area all the way across into the rear of the brain." It seems O'Connor is not the most persuasive witness to cite in arguing for the authenticity of autopsy photos showing no defect behind JFK's right ear.

A full exploration of Humes' and Boswell's claims about JFK's skull wound is beyond the scope of this discussion. But suffice it to say, both of them gave testimonies to the HSCA, and some was published in volume 7:246-260. They unambiguously disputed the "obvious" entrance wound that is visible in the autopsy photographs, and Boswell claimed part of the occipital bone was missing when they first examined the body. Both steadfastly maintained that there was a wound near the external occipital protuberance, yet there is no likely candidate for such a wound in the photographs of the rear of JFK's scalp. Thus I believe Twyman is wrong to conclude there is no inconsistency between Humes, Boswell, O'Connor and the autopsy photos.

JFK's officially authenticated photographs show no defect behind the right ear whatsoever, the area most people (especially physicians) mean when they say "occipital," "posterior," or "rear." Some critics maintain that JFK had a right rear skull defect, and yet there has been no photo tampering despite the obvious absence of a defect in autopsy images. According to this view, autopsy personnel are covering up the rear defect in the scalp by pulling JFK's scalp forward.

One of the autopsy images undermines this interpretation, however. (See image on p.78 of Robert Groden's The Killing of the President.) This autopsy image shows the back of JFK's head and upper back. At the top edge of the frame the edge of the scalp along the top of the skull can be seen, and no hand is pulling it forward. Now it may be that the body is in a prone position, with gravity keeping the right rear scalp flopped forward over the right rear of a skull defect. But if bone is missing in the rear area, as described by O'Connor and the pathologists and so many others, there is no depression in the scalp in this area to suggest it. This image is consistent with the other images that show no defect behind JFK's right ear, but only one anterior to it. (see, again, Groden, p.81) If the images are untampered with, one is mightily tempted to regard reports of a skull defect involving the "occipital," "posterior," or "rear" of JFK's skull as erroneous.

The root of my disagreement with Verb is his implication Twyman and I have mishandled the witnesses. Verb, who accepts the good evidence there is that once extant autopsy images have been destroyed, apparently resists believing the surviving images have been tampered with. His point seems to be that those who have argued for forgery have done so by misquoting, or misinterpreting, credible witness descriptions so as to manufacture inconsistencies with the existing photographs. I don't believe that position can now be defended - the images *are* inconsistent with witness statements. The why is a different question, and one I can't answer.

Rather than quibbling over whether physician witnesses really meant "occipital" when they said "occipital," "posterior," when they said "posterior," or "rear," when they said "rear," perhaps Verb would do better by coming up with a good explanation for the photographs we have. It would be very useful, for example, if he could explain how so many credible witnesses made the same error about there being a rearward defect on the right side of JFK's skull when authentic photographs show there was no defect behind the right ear at all. Or, given the fact error tends to be random, perhaps he could explain how it was that not a single witness - of over 40

- was able to come up with even an acceptable description of the anterolateral wound the photographs prove was there, but instead located the wound to the same, wrong position.

I am not insisting, however, that the contrary witnesses prove the autopsy photographs are forged, especially when no one has named the forgerer, nor the precise manner in which she did it. Nor can anyone deny that the government has produced experts who have claimed authentication. Verb is certainly right to not leap too quickly into the forgery camp.

But the autopsy photographs are certainly baffling, and Verb is probably right to accept the idea of photo destruction. After all, the record does reflect that all three of JFK's pathologists, both of the autopsy photographers, White House photographer Robert Knudsen, as well as autopsy witness Robert Karnei, MD and former Naval Photographic Center employee Saundra Spencer, have all claimed that autopsy images are missing. Would that photo deletion alone solve all the mysteries? Annoyingly, it doesn't.

Forgery advocates still cannot be blithely dismissed. The forgery hypothesis has at least one powerful thing going for it: It offers a simple and elegant explanation for the astounding improbability that so many credible witnesses independently made the same error: they weren't wrong! One can't help but wonder which is more likely: that so many good witnesses made the same error, or that there has been doctoring of autopsy photos in a case in which it is all but certain the photo inventory has already been doctored by culling? I can think of no easy answer.

I thus differ from Verb in being less negative toward the forgery hypothesis, because of the witnesses, and because the pattern of official misconduct in this case suggests it is imprudent to accept official claims of authentication as indisputable proof of authentication. I will not, however, insist that forgery has been proven. But if, as seems likely, autopsy images have been destroyed, I see no reason to assume the perpetrators would have necessarily stopped there.

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