

down could have lost blood so quickly, and why that person had not been knocked unconscious and remained there when he and Hood arrived. But he saw that the agents meant business, and so for the next twenty years he followed the agent's advice and kept quiet about the vanishing pool of blood. He got no argument from Mrs. Coley.

In 1988, a film crew approached Coley for an interview about Jack Ruby to be used in a television special about the assassination. Coley decided to tell his story about the pool of blood, and the film crew shot footage of the spot where Coley said that he found the blood. Although the reporter on the film crew wanted to use the story, he later told Coley that the director had killed it because so many people who could corroborate the facts were dead. Coley later told Wallace Chariton about the story, who decided to print it because he knew, trusted, and believed Coley. Hugh Aynesworth confirmed the story, but still believed the pool of liquid was simply soda pop. When Chariton interviewed U.S. Marshall Clinton Peoples for another story in his book, he learned that Peoples has had a deep interest in the JFK assassination and has actually worked privately on the case since 1963. When asked if he knew of the pool of blood and if it was involved in the assassination, he simply replied "It most definitely was involved." He declined to elaborate. Among the many questions this story raises is: Who did the blood belong to? Was a bystander caught in the crossfire, or did the blood belong to a conspirator? How did the person manage to escape detection when so many policemen were in the vicinity of the knoll? Why didn't anyone else report the story of the pool of blood? How did the blood manage to disappear in a few days, unless someone cleaned it up? How did the FBI find out about the story and the photographs? Is there anything in the files about the blood? Perhaps someone could provide an answer.

Notes

1. Wallace O. Chariton, C.F. Eckhardt and Kevin R. Young, "The Pool of Vanishing Blood." UNSOLVED TEXAS MYSTERIES. Wordware Publishing, Inc. 1991. 1506 Capital Ave., Plano, TX 75074.

THE HOUSE SELECT COMMITTEE ON ASSASSINATIONS AND THE AUTOPSY PHOTOGRAPHIC EVIDENCE

by

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Parkland witnesses to JFK's skull wound virtually unanimously described a defect in the right rear of JFK's skull. For example, neurosurgery professor, Kemp Clark, MD, closely examined JFK skull and wrote on 11/22/63, "There was a large wound beginning in the right occiput extending into the parietal region...Much of the skull appeared gone at the brief examination..." (Emphasis added) (Exhibit #392: WC V17:9-10) Dr. Clark's claim of a rearward skull defect was also repeated by Parkland witnesses Drs. Marion Thomas Jenkins, Malcolm Perry, Robert McClelland, Charles Carrico, Ronald Coy Jones, Gene Aiken, Paul Peters, Charles Rufus Baxter, Robert Grossman, Richard Brooks Dulaney, Fouad Bashour, and others. A skull defect in the right rear seems incongruous with a bullet entering the rear skull and supposedly exiting the front, as is alleged to have resulted from Oswald's fatal shot. The autopsy photographs contradict the Parkland witnesses—they show an "anterolateral", defect, that is a defect in the right front. The inconsistencies have raised the question of possible photographic tampering.

Regarding this dilemma, The House Select Committee on Assassinations (HSCA) wrote, "Critics of the Warren Commission's medical evidence findings have found (sic) on the observations recorded by the Parkland Hospital doctors. They believe it is unlikely that trained medical personnel could be so consistently in error regarding the nature of the wound, even though their recollections were not based on careful examinations of the wounds...In disagreement with the observations of the Parkland doctors are the 26 people present at the autopsy. All of those interviewed who attended the autopsy corroborated the general location of the wounds as depicted in the photographs; none had differing accounts...it appears more probable that the observations of the Parkland doctors are incorrect." (Emphasis added. HSCA, Vol. 7:37-

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39) The statement is supported by reference to "Staff interviews with persons present at the autopsy." Recently released documents reveal for the first time that the HSCA misrepresented the statements of virtually all of its own Bethesda "staff interviews" on the location of JFK's skull defect. Rather than contradicting Parkland witnesses that there was a rear defect in JFK's skull, Bethesda witnesses corroborated them. Bethesda witnesses not only described a rear defect to HSCA, they also drew diagrams that overwhelmingly showed a defect at the rear, or right rear of JFK's skull. By falsely representing its own data, HSCA writers inaccurately portrayed Bethesda witnesses as contesting the observations of Parkland witnesses who in fact they supported. They apparently also sought to quell the controversy regarding the autopsy images which show no defect where Parkland, and now incontestably Bethesda, witnesses all saw it. Discouragingly, public access to these inconvenient interviews and diagrams, which were of no national security value whatsoever, was to have been restricted for 50 years.

The HSCA also failed to acknowledge the Warren Commission testimonies of other credible Bethesda witnesses who described a rear defect. Secret Service agent Clint Hill reported a wound on "the right rear portion of the skull." (WC—CE#1024, V18:744—emphasis added). Secret Service agent Roy Kellerman told the Warren Commission's Arlen Specter that JFK's skull defect was "To the left of the (right) ear, sir, and a little high; yes...('Indicating the rear portion of the head.') was absent when I saw him." (WC—V2:80—81) (emphasis added). After Secret Service agent William Greer manually demonstrated the defect's location to the Commission, Arlen Specter asked, "Upper right side, going toward the rear, and what was the condition of the skull at that point?" Greer: "The skull was completely—this part was completely gone." (Warren Comm—V2:127—emphasis added) Moreover, other Bethesda witnesses interviewed by authors David Lifton, Harrison Livingstone and Robert Groden, as well as others, also described a rear defect in the skull. (Space constraints prevent a complete listing).

The HSCA's interviews demonstrated a remarkable consistency between the Bethesda witnesses' claims to the Warren Commission, to authors, and to the HSCA. James Curtis Jenkins, in a Pathology Ph.D. program at the time of the autopsy, was a laboratory technologist who worked with the autopsy team on JFK. The HSCA's Jim Kelly and Andy Purdy reported that Jenkins said he saw a head wound in the

"...middle temporal region back to the occipital," (HSCA interview with Curtis Jenkins, Jim Kelly and Andy Purdy, 8—29—77. JFK Collection, RG 233, Document #002193, p. 4—emphasis added.) Jenkins prepared a diagram for the HSCA that was only recently released. It confirms his verbal description of a defect in the right rear of the skull.

FBI agent James Sibert was interviewed by the HSCA's Jim Kelly and Andy Purdy who reported, "Regarding the head wound, Sibert said it was in the "...Upper back of the head." (sic) In an affidavit prepared for the HSCA, Sibert claimed "The head wound was in the upper back of the head", and "...a large head wound in the upper back of the head with a section of the skull (sic) bone missing..." Sibert sketched a drawing of the skull wound and traced a small wound square in the central rear portion of the skull, slightly above the level depicted for the ears but well below the level depicted for the top of the skull. (HSCA REC #002191—Emphasis added.)

Tom Robinson was the mortician who prepared John Kennedy's remains for his coffin. Robinson assisted with the preparations for an open casket funeral so preparation of the skull was especially meticulous. Robertson described the skull wound in a 1/12/77 HSCA interview with Andy Purdy and Jim Conzelman:

Purdy: "Approximately where was this wound (the skull wound) located?" Robinson: "Directly behind the back of his head."

Purdy: "Approximately between the ears or higher up?"

Robinson: "No, I would say pretty much between them." (HSCA rec #189—10089—10178, agency file #000661, p. 3—emphasis added.) On the day of their interview Purdy and Conzelman signed a diagram prepared and also signed by Robinson. The sketch depicts a defect directly in the central, lower rear portion of the skull. (HSCA doc #180—10089—10179, agency file #000662).

Jan Gail Rudnicki was Dr. Boswell's lab assistant on the night of the autopsy. Rudnicki was interviewed by HSCA's Mark Flanagan on 5/2/78. Flanagan reported Rudnicki said, the "back-right quadrant of the head was missing." (Emphasis added. HSCA rec #180—10105—10397, agency file number #014461, p. 2). The author is unaware of any diagram Rudnicki might have prepared.

John Ebersole, MD, was the attending radiologist at JFK's autopsy. In HSCA testimony recently released, Ebersole claimed, "The back of the head was missing..." (HSCA interview with Ebersole, 3/11/78, p. 3), and when shown the

autopsy photograph with the back of the scalp intact, Ebersole commented, "You know, my recollection is more of a gaping occipital wound than this but I can certainly not state that this is the way it looked. Again we are relying on a 15 year old recollection. But had you asked me without seeing these or seeing the pictures, you know, I would have put the wound here rather than more forward." (HSCA interview with Ebersole, 3-11-78, p. 62). Yet Ebersole claimed that "I had the opportunity (to examine the back of JFK's head while positioning the head for X-rays) (HSCA Ebersole interview, 3-11-78, p. 64). Later Ebersole said, "...perhaps about 12:30 (AM) a large fragment of the occipital bone was received from Dallas and at Dr. Finck's request I X-rayed these (sic)..." If an occipital bone fragment did arrive late for the autopsy, the defect must indeed have been posterior. The occipital bone is at the base of the rear of the skull. No diagram from Dr. Ebersole has been released by the HSCA.

Philip C. Wehle—then Commanding officer of the military District of Washington, D.C., described the head wound to the HSCA's Andy Purdy on 8-19-77, who reported, "(Wehle) noticed a slight bruise over the right temple of the President but did not see any significant damage to any other part of the head. He noted that the wound was in the back of the head so he would not see it because the President was lying face up; he also said he did not see any damage to the top of the head, but said the President had a lot of hair which could have hidden that..." (Emphasis added. HSCA record #10010042, agency file #002086, p. 2) The author is unaware of any diagram Wehle might have prepared for the HSCA.

Chester H. Boyers "was stationed at Bethesda naval hospital and was the chief Petty Officer in charge of the Pathology Department in November 1963." (HSCA Telephone contact—Mark Flanagan, 4-25-78, rec # 13614). Flanagan reported, "In regard to the wounds Boyers recalls an entrance wound in the rear of the head to the right of the external occipital protuberance which exited along the top, right side of the head towards the rear and just above the right eyebrow." (Emphasis added. HSCA Telephone contact—Mark Flanagan, 4-25-78, rec #13614, p. 2).

FBI agent Francis X. O'Neill prepared a diagram from the HSCA showing a defect in the right rear quadrant of JFK's skull. The author is unaware of any interview with O'Neill among the files released by the HSCA.

The only comment I found in HSCA interviews that is not frankly incompatible with the photographic images, which

only imperfectly suggest an anterolateral defect (persona opinion having seen the original images at the National Archives by permission of the JFK family), is that attributed to Captain John Stover, then Commanding Officer of the National Naval Medical School. The HSCA's Mark Flanagan reported, "Stover observed...a wound on the top of the head..." Stover's description is so ambiguous to be of no use to either side of the debate.

That the HSCA's interpretations of its interviews with Bethesda witnesses are so at variance with what these people actually said suggests there may have been another reason the HSCA wished the documents to be publicly unavailable for 50 years. Whether Parkland and Bethesda witnesses both miraculously made the identical error in describing a right-rear defect, rather than a right-front defect, is problematic to say the least. Whatever the truth, the HSCA did no service to the truth by misrepresenting its own witnesses to dishonestly settle the still simmering controversy of where JFK's skull defect was. Nor did the HSCA do service to the taxpayers who supported its work, and who must now warily regard its medical conclusions.

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THE LATE ARRIVING FRAGMENT: REALITY BITES

by

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During the assassination of President Kennedy a large fragment of skull was removed which was later presented to the autopsy team during the later stages of the autopsy where it was determined to represent a portion of an exit wound. By evaluating the films of the assassination as well as the radiographs and eyewitness descriptions of this piece of skull, it can be shown that it originated from the top rear of the skull and was displaced by a second gunshot wound to the head.

The backward head snap, following an initial forward movement, seen on the Zapruder and Nix films, has long been

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