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HAROLD,

3-4-98

SOME OF US, INCLUDING
TINK THOMPSON, ARE
KICKING THIS AROUND
FOR PRE-PUBLICATION
SCRUTINY.

BEARING IN MIND YOUR
WARINESS ON THIS
SUBJECT, I'VE TRIED
TO UNDERSTATE IT IN
A WAY THAT NOT EVEN
THE OLD MASTER - YOU -
WOULD FIND TOO
OBJECTIONABLE.

BEST PERSONAL REGARDS!
Gary

Formerly Suppressed Evidence Raises New Doubts about JFK's Autopsy Photographs

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With Cyril Wecht, MD, JD and Kathy Cunningham

INTRODUCITON

President John F. Kennedy was assassinated almost 35 years ago. When Oliver Stone's controversial film about his murder, *JFK*, debuted in 1991, an emotional debate erupted over whose history of Kennedy's slaying was right. Was the Warren Commission right in 1964 that a lone-nut assassin, Lee Harvey Oswald, firing from above and behind him, single-handedly killed JFK? Or were the critics who believed in a conspiracy right? Intriguing new answers may lie in autopsy evidence that has recently surfaced after having been suppressed by the government for years.

At the center of the controversy are the related questions about the integrity of the autopsy photographs, and quite stark differences between what the autopsy witnesses saw and what the autopsy photographs show. If Lee Harvey Oswald fired the shot, JFK's large and fatal skull wound should have been toward the front of his head, for that is the area through which the rear-entering bullet exploded out of JFK's cranium according to the Warren Commission's theory. Autopsy photographs seem to confirm that this is precisely what happened. They reveal only a tiny wound of entrance in the rear of JFK's skull, and a large blowout wound toward the front on the right side. So this photographic "best evidence" seemed quite consistent with Oswald's guilt, until recently.

Formerly secret documents have revealed for the first time that JFK's large fatal skull wound may well not have been toward the right front of his head, where it appears in photographs, but in the rear. But what about the photographs? All three of JFK's pathologists, and both autopsy photographers, have claimed under oath that they took photographs that are not in what is said now to be the complete inventory of photographs. Moreover, a White House photographer said he developed and examined autopsy images that don't now exist. More discouragingly, the House Select Committee on Assassinations (HSCA), which reinvestigated JFK's death in 1978 to settle lingering doubts about the Warren Commission, falsified statements of autopsy witnesses about JFK's wounds in its report, thereby putting a pro-Warren Commission spin on what appears now to be prickly autopsy contradictions. It then ordered this non-sensitive evidence suppressed from the public for 50 years. How a controversial film led to such discoveries was as important a story as the disclosures themselves.

The ruckus that followed the premier of Stone's *JFK* raised widespread public doubts about the need for the continued official secrecy - more than 30 years after the murder - of a mountain of documents still being withheld. A change was not long in coming. In 1992, the US Congress passed a little known statute, The JFK Records Act,¹ intended to lessen, wherever possible, the secrecy. The Act led, after lengthy procedural delays, to the creation of the Assassinations Records Review Board, a panel of civilian historians appointed by Bill Clinton. The Board members were finally sworn in on April 11, 1994, and set to work locating, reviewing and publicly releasing all possible documents relating to JFK's murder. With one year remaining before the Review Board's scheduled termination, it seems clear already that declassified documents from the Warren Commission and the HSCA may never fully satisfy either side of the debate, at least with regards to JFK's medical and autopsy evidence. It is also clear that the evidence will encourage further distrust of government investigations in general, and the Warren Commission's and HSCA's investigations in particular.

BAFFLING DISCREPANCIES

A sophomore in high school when Kennedy was shot on November 22, 1963, I'd paid little attention to early Warren critics, possibly because I'd acquired my staunchly Republican parents' dislike of Kennedy. The discouraging revelations of official lies and cover-ups in Vietnam, Watergate and elsewhere, however, made me wonder if perhaps the American majority that distrusted the official verdict in the Kennedy case might not be entirely wrong. After seeing *JFK* I dusted off some of old books I'd collected on the subject, and delved back into it with renewed interest.

As a physician, I was naturally drawn to the medical/autopsy evidence. I read with fascination the *Journal of the American Medical Association's (JAMA's)* May 27, 1992 interviews with the pathologists who performed JFK's autopsy. In *JAMA* they hotly disputed Oliver Stone's depiction of them as being under intense pressure while performing a "controlled" autopsy.² Inexplicably, however, they refused to appear with *JAMA*'s editor, George D.

Lundberg, MD, at a news conference called to announce the publication of their revelations.³ Though an American Medical Association member myself, I wasn't reassured that Lundberg, to whom JFK's pathologists had granted the "exclusive" interviews, was himself a former military pathologist.

I wrote a letter to *JAMA's* editor asking the pathologists several questions. Luckily my letter was selected and published alongside many other letters.⁴ But when JFK's pathologists refused to answer every single medical colleague's question in a "peer-reviewed" medical journal, including mine,⁵ I thought the medical/autopsy evidence might be worth a closer look. If nothing was amiss, why were JFK's pathologists giving exclusive interviews only to a fellow military pathologist who was also their personal friend? And why were they dodging the press and their own professional colleagues so long after the assassination? I successfully petitioned the Kennedy family to see the still-restricted autopsy photographs and X-rays.⁶ Despite the fact bootleg copies of the real autopsy images had repeatedly been published, the originals were of far higher quality, and were just as baffling. As the Review Board's work progressed, and suppressed documents spilled out, my bafflement didn't diminish.

The most confusing aspect of the autopsy evidence to me was the huge discrepancy between the witnesses' description of JFK's fatal wound and the autopsy photographs. Virtually every witness described JFK's fatal wound as a gaping skull wound toward the right rear of JFK's head. The autopsy photographs revealed a skull wound toward the right front of JFK's skull, with no damage at all behind his right ear. Two groups of witnesses with ample opportunity to judge Kennedy's skull wound had seen him on the day of the assassination: the emergency medical team at Dallas' Parkland Hospital, where JFK underwent a valiant, though unsuccessful, resuscitation effort, and witnesses present during JFK's four hour autopsy at Bethesda Naval Hospital, near Washington, D.C.

PARKLAND HOSPITAL – CREDIBLE WITNESSES?

Parkland Hospital in Dallas, renowned for its experienced, and expert, trauma staff, was the best hospital the limousine driver could possibly have taken JFK after the shooting. Treating Parkland physicians described seeing a defect in the right rear of JFK's skull. For example, neurosurgery professor, Kemp Clark, MD, examined JFK's skull wound before pronouncing him dead. Later that same day, he wrote, in an official summary, "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..."⁷ (Emphasis added) Over twenty other Parkland witnesses, many of them physicians, repeated Dr. Clark's mention of a right-rearward, "occipital," skull defect.⁸ The "occipital" region of the skull overlies the occipital bone, a bone directly in the lower rear part of the back of the skull. When you lie down on a bed face up, your "occiput", or "occipital" scalp, touches the pillow. I discovered that among over 20 Parkland witnesses who described JFK's skull defect as rearward, 8 participating physicians used the term "occipital" in documents available in the Warren Commission's volumes: Drs. Kemp Clark, Robert McClelland, Marion Thomas Jenkins, Charles J. Carrico, Malcolm Perry, Gene Aikin, Paul Peters, and Charles R. Baxter. Non-physician witnesses at Parkland described JFK's skull wound the same way. Not a single Parkland witness described to the Warren Commission the right-front gaping skull wound present in the photographs.

~~But, I wondered,~~ how could JFK's skull defect be in the right rear if the autopsy photographs, which show only a tiny hole in the rear, and a large exit defect toward the right front, are accurate?⁹ Besides, a gaping skull wound in the right rear seemed incompatible with the official version that had Oswald's bullet causing a small entrance wound on entering the back of JFK's skull, only to blow out a large exit wound toward the right front as it left the skull. There was another problem with the witnesses, too.

A frequently cited experiment reported in the *Harvard Law Review* had shown that when test subjects were asked about "salient" details of a scene they had witnessed, their accuracy rate was 78% to 98%. Even when a detail was *not* considered salient, witnesses still were accurate over 60% of the time.¹⁰ JFK's fatal skull wound would certainly have been a "salient detail" to experienced medical witnesses. But if JFK's autopsy photographs were right, they proved that over 90% of the witnesses were wrong! Only a few witnesses gave vague and useless descriptions, and it is only these that don't flatly contradict the photographs. Since error tends to be random, I couldn't fathom how so many Parkland witnesses could have made the exact same mistake by agreeing on the same wrong location in the rear. But were they really in error? Perhaps not, though as I discovered, a hot controversy over Parkland witnesses' descriptions of JFK's skull wound was at least twenty years old. As the records were released, it got hotter.

JFK's AUTOPSY PHOTOGRAPHS - AND THE HSCA - "REFUTE" PARKLAND WITNESSES

In fact, in the 1978 reinvestigation of JFK's death, although the HSCA concluded a murder conspiracy was "probable," it nevertheless went to great lengths to back up the Warren Commission's version of JFK's gaping skull wound by specifically refuting Parkland witnesses who described it in the rear. The HSCA reported, "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 ... 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."¹¹ (emphasis added)

The HSCA's statement, supported, the HSCA said, by "Staff interviews with persons present at the autopsy"¹² was devastating to critics who believed that Parkland witnesses proved a different wound, a different bullet trajectory, and, most importantly, perhaps even a different gunman than Oswald. *JAMA* put the "mistake" in perspective, explaining that Parkland witnesses were more concerned with saving JFK's life in an emergency situation than with accurately observing his wounds.¹³ The refuting autopsy witnesses, which included other physicians besides the pathologists, calmly watched the pathologists explore JFK's wounds over a period of several hours. They were undeniably in a far better position than Parkland's witnesses to accurately describe the wounds. But the proof - the autopsy witnesses' interviews before the HSCA - did not appear anywhere in the 12 volumes the HSCA published. They were suppressed.

PARKLAND WITNESSES REDEEMED

Review Board-released documents have revealed for the first time that the HSCA misrepresented these statements of its own Bethesda autopsy witnesses on the location of JFK's skull defect. The HSCA also overlooked the Warren Commission statements of the autopsy witnesses as well. It was not true, as reported by the HSCA, that the autopsy witnesses unanimously corroborated photographs showing JFK's gaping skull wound was toward the right front side of his head. On the contrary. Whereas over 20 witnesses at Parkland described JFK's skull defect as rearward, suppressed documents show that, similarly, over 20 autopsy witnesses said the same thing. In fact, not a single witness described what is visible in the photographs: a wound toward the right front of JFK's skull. Typical of such HSCA witnesses was James Curtis Jenkins, a Ph.D. candidate in pathology who worked as a laboratory technologist with JFK's autopsy team. 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."¹⁴ Assuming the photographs were accurate representations of JFK's wounds, the mystery suddenly deepened. Not only were virtually all Parkland and Bethesda witnesses wrong to locate JFK's gaping skull wound toward the rear, not a single one of them - of over 40 - got it right!

For example, the Warren Commission reported that after observing the autopsy Secret Service agent, Clinton J. Hill, reported, "I observed another wound (in addition to JFK's throat wound) on the right rear portion of the skull."¹⁵ Hill's recollections, as well as other, similar autopsy witness descriptions of JFK's rearward skull wound, have been available in the Warren Commission volumes since 1964. But what of the HSCA's suppressed autopsy witnesses? Jan Gail Rudnicki, a lab assistant on the night of the autopsy, was interviewed on 5/2/78 by HSCA counsel, Mark Flanagan, JD. Flanagan reported Rudnicki told him, the "back-right quadrant of the head was missing."¹⁶ Philip C. Wehle, Commanding officer of the military District of Washington, D. C., was interviewed by HSCA counsel, D. Andy Purdy, JD on 8-19-77. Purdy's formerly suppressed memo reported that, "(Wehle) noted that the wound was in the back of the head so he would not see it because the President was lying face up ..."¹⁷ Several of the autopsy witnesses, including two FBI agents, prepared diagrams for the HSCA that depicted JFK's skull with a right-rearward gaping skull wound. These diagrams were also suppressed. Thus in HSCA interviews and diagrams, as well as in Warren Commission interviews, JFK's autopsy witnesses reported - as overwhelmingly as had Parkland witnesses - that JFK's skull wound was in the right rear. The HSCA's report to the contrary simply muffed it.

But who wrote the HSCA's inaccurate summary, and who decided to keep the interviews and diagrams from the public? I wrote HSCA counsel, Mark Flanagan, JD, who conducted a number of the interviews. He never answered. I spoke with HSCA counsel, D. Andy Purdy, JD, who conducted many of the interviews, and I wrote the former chairman of the HSCA, Robert Blakey, now a Notre Dame law professor. Neither could recall who had written the inaccurate passage, nor could either explain why the non-sensitive interviews were suppressed. Purdy did concede, however, that he was "not happy" with the way the misleading passage had been written.

Unfortunately the public was not the only group that was kept in the dark about the HSCA's autopsy witnesses. The HSCA's own forensic experts, tasked with evaluating the autopsy evidence, were apparently not shown the autopsy witness interviews or diagrams either. In 1995 I spoke at a conference in Washington, D.C., hosted by the *Coalition on Political Assassinations*, on the subject of the JFK autopsy evidence. I showed both the former chairman of the HSCA's forensic panel, Michael Baden, MD, and one of the HSCA's panelists, co-author Cyril Wecht, MD, JD, the current chief coroner of Pittsburgh, the suppressed autopsy interviews and diagrams.¹⁸ Both were also lecturing with me that day in Washington, and they were standing with me on the podium. After my presentation during which I slide-projected images of the suppressed diagrams and testimonies, both admitted they had never seen this evidence before, yet it was their responsibility to assess this evidence for the HSCA. Had this knowledge been shared with the HSCA's forensics consultants, it might have led the HSCA investigators toward evidence finally being pursued today – 20 years later - by the Review Board: the possibility that the photographic inventory from JFK's autopsy has been compromised.

THE RELIABILITY OF THE AUTOPSY PHOTOGRAPHS

If it were true that the autopsy photographic record had somehow been tampered with, there might be an easy way to explain what is otherwise staggeringly improbable: that over 40 witnesses were unanimously wrong JFK had a gaping wound toward the rear of his skull. Intriguingly, formerly secret evidence has emerged supporting just such a possibility.

In a once secret memo, HSCA counsel, D. Andy Purdy, JD, reported that chief autopsy photographer, "(John) STRINGER (sic) said it was his recollection that all the photographs he had taken were not present in 1966 (when Stringer was first saw the photographs).¹⁹ There are no photographs of the interior of Kennedy's chest in the "complete" set of autopsy images at the National Archives. However every autopsy participant who was asked recalled that photographs were taken of the interior of JFK's body, as they should have been to document the passage of a non-fatal bullet through JFK's upper chest.

Stringer told the HSCA he recalled taking "at least two exposures of the body cavity."²⁰ An HSCA memo reported that James Humes, MD, JFK's chief autopsy pathologist, "... specifically recall(ed photographs) ... were taken of the President's chest ... (these photographs) do not exist,"²¹ and, "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,"²² and "... we described a contusion in the apex of the lung and the interior surface of the dome of the right plaural 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."²³ This testimony dovetailed with what he told the Warren Commission, "Once again Kodachrome photographs were made of this area in the interior of the President's chest."²⁴

Regarding J. Thornton Boswell, MD, the pathologist who was second in command after Humes, the HSCA claimed "... he (Boswell) thought they photographed '... the exposed thoracic cavity and lung ...' but (he) doesn't remember ever seeing those photographs."²⁵ Robert Karnai, MD, a physician-witness who was not a member of the autopsy team, told the HSCA, "He (Karnai) recalls them putting the probe in and taking pictures (the body was on the side at the time) (sic)."²⁶ Floyd Reibe, the assistant autopsy photographer, was reported to have told the HSCA, "he thought he took about six pictures--I think it was three film packs'--of internal portions of the body."²⁷

Besides these surprising statements, perhaps the suppressed testimony of the only forensics-trained pathologist present at the autopsy, Pierre Finck, MD, is the most fascinating on the question of missing photographs. He, like Drs. Humes and Boswell, was called to testify before the HSCA. He brought along some of his old notes on the JFK case to help him. In these notes, which Finck apparently prepared contemporaneously and submitted to the HSCA, he had written: "I help the Navy photographer to take photographs of the occipital wound (external and internal aspects) (sic)."²⁸ The purpose of such photographs, of course, was to show a forensically important feature of a bullet entrance wound – "beveling." As with a BB hitting a pane of glass, when a bullet goes through bone a small hole often appears on the outside, and a larger crater is left on the inside. This 'beveling phenomenon' is used by pathologists, though not infallibly, as an aid in determining the direction of the bullet.

Finck described to the HSCA that he endeavored to capture photographically the beveling in JFK's skull bone to prove that JFK had a low - occipital bone - entrance wound. His suppressed testimony, like the testimony Drs. Humes and Boswell gave in public HSCA session,²⁹ shows him under siege. The forensic panelists, relying only on photographs and X-rays, were of a different mind. They insisted the wound was not low in JFK's skull, but high instead, and in a different bone - parietal. A high, parietal location was ballistically compatible with Oswald's alleged firing position; the pathologists' low wound was not. Photographing the presence of "beveling" in JFK's skull bone would have been routine, and necessary, documentation, for this was the fatal wound. Suitable images could only have been of bone, not soft tissue such as scalp. (Soft tissue will not demonstrate beveling, just as a bullet "wound" through a carpet will not show beveling.) Finck told the HSCA he purposely took such images, but he claimed under oath he never saw those photographs in an illuminating exchange before the HSCA, released for the first time in 1993.

In the following exchange, Finck was being shown the autopsy photographs before the forensics panel and asked to comment on them:

(HSCA counsel D. Andy) Purdy: "We have here a black and white blow up of that same spot (a spot on the rear of JFK's scalp he claimed was the location of the bullet's entrance). You previously mentioned that your attempt here was to photograph the crater, I think was the word that you used."

Finck: "In the bone, not in the scalp, because to determine the direction of the projectile the bone is a very good source of information so I emphasize the photographs of the crater seen from the inside the skull. What you are showing me is soft tissue wound (sic) in the scalp."

A few moments later, the following exchange occurred:

Charles Petty, MD: "If I understand you correctly, Dr. Finck, you wanted particularly to have a photograph made of the external aspect of the skull from the back to show that there was no cratering to the outside of the skull."

Finck: "Absolutely."

Petty: "Did you ever see such a photograph?"

Finck: "I don't think so and I brought with me memorandum referring to the examination of photographs in 1967... and as I can recall I never saw pictures of the outer aspect of the wound of entry in the back of the head and inner aspect in the skull in order to show a crater although I was there asking for these photographs. I don't remember seeing those photographs."

Petty: "All right. Let me ask you one other question. In order to expose that area where the wound was present in the bone, did you have to or did someone have to dissect the scalp off of the bone in order to show this?"

Finck: "Yes."

Petty: "Was this a difficult dissection and did it go very low into the head so as to expose the external aspect of the posterior cranial fascia (sic - meant "fossa")?"

Finck: "I don't remember the difficulty involved in separating the scalp from the skull but this was done in order to have a clear view of the outside and inside to show the crater from the inside ... the skull had to be separated from it in order to show in the back of the head the wound in the bone."³⁰

Evidence that these key photographs were taken dates to the Warren Commission. During his Warren Commission testimony, while discussing the beveling that was visible in the occiput, Commander Humes claimed, "This wound then had the characteristics of wound of entrance from this direction through the two tables of the skull."

Arlan Specter: "When you say 'this direction,' will you specify that direction in relationship to the skull?"

Humes: "At that point I mean only from without the skull to within ... and incidentally photographs illustrating this [beveling] phenomenon from both the external surface of the skull and from the internal surface were prepared."³¹

No photograph currently exists that shows the skull wound image(s) Finck and Humes mentioned taking, a fact which may have later caused some consternation. Humes's specifying this photography in his Warren Commission testimony appears to have been what was being referred to in a suppressed 1967 LBJ memo, in which it was reported, "There is this unfortunate reference in the Warren Commission report by Dr. Hinn (almost certainly Humes, there was no "Dr. Hinn") to a picture that just does not exist as far as we know."³²

None of these classified interviews and memos posed any national security threat, and so should never have been suppressed. But among all the HSCA testimonies cited in which missing photographs are described, only one (ref. #22) was available to the public before the Review Board. It is not easy to escape the conclusion that choosing which non-sensitive testimonies to suppress was not an entirely random process at the HSCA.

The question naturally arises, did anyone ever see autopsy images that have since disappeared? The answer apparently is, Yes. In another previously suppressed interview, former White House photographer, Robert Knudsen, told the HSCA he developed negatives from JFK's autopsy, which he examined in the course of his work on November 23, 1963. During the HSCA's investigation, he was shown the complete photographic inventory. Repeatedly resisting pressure to back down, Knudsen insisted that in 1963 he saw at least one image not in the inventory he was shown in 1978 - an image with a metal probe through JFK's body that entered the back at a lower position than it exited through the throat wound.³³ (Dr. Robert Karnie testified to the taking of such images - see above, ref. # 29.) Inasmuch as Oswald is supposed to have fired from above and behind JFK, who was then not leaning forward, if the back wound was indeed lower than the throat wound of exit in front, Oswald simply didn't to it.

"JFK'S PATHOLOGISTS" ENDORSE THE COMPLETENESS OF THE PHOTOGRAPHIC INVENTORY

Growing doubts about the autopsy photographs don't eliminate the fact the HSCA claimed JFK's autopsy photographs had been "authenticated." While a thorough exploration of the question of authentication is beyond the scope of this discussion, there is no record the HSCA ever dealt with the question of the completeness of the photographic inventory, though possibly not without some justification. For "on the record" from 1966 there already was an affirmation the inventory was complete - signed by the very men who had testified to the HSCA that it was not complete! On 11/10/66, after examining the images at the National Archives, Drs. Humes, Boswell, the radiologist Dr. John Ebersole, and autopsy photographer, John Stringer, all signed an affidavit. It read, "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."³⁴ Besides the fact it contradicted their testimonies, one must wonder why they or anyone would write such a statement about a group of photographs they took three years before and never saw.

But the signatories apparently did not write the statement, they merely signed one that was prepared for them. This was suggested by a recently released document which reads, "On the afternoon of November 10, 1966, I (Carl W. Belcher) took the original and one carbon copy of the document entitled 'Report of Inspection by Naval Medical Staff on November 1, 1966 at National Archives of X-Rays and Photographs of Autopsy of President John F. Kennedy' to the Naval Medical Center, Bethesda, Md., where it was read and signed by Captain Humes, Dr. Boswell, Captain Ebersole and Mr. John T. Stringer. Certain ink corrections were made in the document before they signed it ..."³⁵

Another suppressed record supports the idea that the memo signed by Humes, Boswell, Ebersole and Stringer was prepared by the Justice Department. Ironically, this second memo also raises the question of a missing autopsy photograph. In a memo titled, "President Johnson's notes on Conversation with Acting Attorney General Ramsey Clark - January 26, 1967 - 6:29 PM," a conversation between LBJ and the Attorney General is summarized: "On the other matter, 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 [sic] conclusively support the autopsy report rendered by them to the Warren Commission, though we were not able to tie down the question of the missing photo entirely but we feel much better about it and we have three of the four sign an affidavit that says these are all the photos that they took and they do not believe anybody else took any others."³⁶

While Dr. Pierre Finck did not sign this particular affidavit, he did sign another, similar document. In a document entitled "PRIVILEGED COMMUNICATION" (sic) which he wrote on February 10, 1967, Finck reported that the Justice Department had prepared another document reaffirming the pathologists' original conclusions that supported Oswald's guilt. That document was reproduced and published in author Harold Weisberg's book, Post Mortem, in 1975.³⁷ Regarding the latter document, which was signed by Drs. Humes, Boswell and Finck, Dr. Finck wrote, "The statement had been prepared by Justice Dept. (sic) We signed the statement."³⁸ These related documents leave the impression that the U.S. Justice Department, which was responsible for the FBI's investigation conducted on behalf of the Warren Commission, was endeavoring behind the scene in 1966 and 1967 to reaffirm the original conclusions.

PHOTOGRAPHIC TAMPERING IN JFK'S AUTOPSY?

It is safe to say the central evidence that the photographic inventory is complete is the "Carl Belcher" memo signed by the three Bethesda physicians and the chief autopsy photographer. That every one of the signatories has since refuted it under oath may be construed as evidence they knowingly signed a false affidavit. The unanswered question is, Why? Was pressure exerted?

Whatever the truth, it appears far from certain that an undiminished photographic record now exists. It seems likely, however, that whoever gave Mr. Carl W. Belcher the completed memo for the witnesses to sign may have wished the photo and X-ray record to appear undiminished. Given the apparent absence of some of the images taken at the autopsy, and the fact that not a single one of 46 descriptions of JFK's fatal wound closely matches the images themselves, it is not surprising some suspect there was also additional photo tampering with the extant images. This is especially true when even Dr. Finck, while being shown a photograph of the virtually pristine backside of JFK's head under oath before the HSCA, had the effrontery to ask, "How are these photographs identified as coming from the autopsy of President Kennedy?"³⁹

As wild as an "autopsy-photograph-tampering" thesis may seem, it may be the least wild explanation of how over forty witnesses from both Parkland and Bethesda miraculously made the identical "error" of describing a right-forward defect as being rearward. It may also be the least wild explanation of why all the key participants agree photographs are missing.

The document releases have unfortunately done more to raise doubts about the official version than they have to lower them. That so many HSCA-gathered documents poking holes in the Warren Commission were suppressed by the very HSCA investigators charged with resolving public doubts will hardly inspire anyone to suggest that a new government investigation is what is needed. While the document releases are unlikely to answer all remaining questions about JFK's death, the Review Board has done a signal service by lifting the cloak of secrecy that has fueled suspicion and mistrust, and spawned so many wild conspiracy theories, over the past thirty years.

When all is said and done, Oliver Stone's shocking film may ironically have brought an unintended benefit to our democracy: the U.S. government has finally begun to do what it should have done long ago without Stone – be open and accountable to us citizens. And, who knows?, when the Review Board's work is done, we may just even learn something about JFK's assassination, besides the fact the government doesn't always report accurately what it has found. More optimistically, if the Review Board initiates a trend toward greater government openness, American citizens may also learn to have more faith in it!

¹ Peterson RS. Declassified. *American History*. V. 31(3):22. August, 1996.

² Breo DL, JFK's death – the plain truth from the MDs who did the autopsy. *JAMA*. 1992; 267:2794-2803. May 27, 1992.

³ *New York Times*, 5/20/92.

⁴ *JAMA*, October 7, 1992.

⁵ Letters to the editor, *JAMA*. 1992;268:1681-1685, October 7, 1992. JFK pathologists, James Humes, MD and J. Thornton Boswell, MD, responded to 8 *JAMA*-published letters to the editor from physician colleagues. One assumes the editors selected these letters, which included one I wrote, because it was believed the questions raised were worth answering. Humes and Boswell declined to answer a single colleague's question. Such a refusal in the peer-reviewed, scientific literature is peculiar to say the least. See enclosed.

Of further note, *JAMA* was successfully sued for libel by Parkland physician witness, and Warren Commission critic, Charles Crenshaw, MD. See enclosed, 2/5/95 article from *Physician's Weekly*. See also the unflattering review of *JAMA's* JFK articles published in *Columbia Journalism Review*, also enclosed.

⁶ See enclosed copy of letter from the Kennedy family attorney, Yale Law Professor, Burke Marshall. You may confirm that I have seen JFK's autopsy images by calling Mr. Steven Tilley at the National Archives, College Park, Maryland. Phone 301-713-6800.

⁷ Warren Commission Exhibit #392. In: Warren Commission Hearings, V17:9-10, hereafter cited as, for example in this case, 17H9-10. Dr. Clark's contemporaneous statement is supported by his subsequent claims: KEMP CLARK, MD, Professor and Director of Neurological Surgery at Parkland, in an undated note apparently written contemporaneously at Parkland described the President's skull wound as, "...in the occipital region of the skull...Through the head wound, blood and brain were extruding...There was a large wound in the right occipitoparietal region, from which profuse bleeding was occurring...There

was considerable loss of scalp and bone tissue. Both cerebral and cerebellar tissue were extruding from the wound." (Emphasis added-throughout) (WC--CE#392)

In a hand written note dated 11-22-63, Dr. Clark wrote, "a large 3 x3 cm remnant of cerebral tissue present....there was a smaller amount of cerebellar tissue present also....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)

In a typed summary submitted to Rear Admiral Burkley on 11-23-63, Clark described the head wound as, "a large wound in the right occipito-parietal region...Both cerebral and cerebellar tissue were extruding from the wound. (Warren Report, p.518, Warren Commission Exhibit #392, Lifton D. Best Evidence, 322)

Under oath and to the Warren Commission's Arlen Specter, Clark described his findings upon arrival to the emergency room, "I then examined the wound in the back of the President's head. This was a large, gaping wound in the right posterior part, with cerebral and cerebellar tissue being damaged and exposed." (Warren Commission, 6H20) Later, Clark testified, "...in the right occipital region of the President's skull, from which considerable blood loss had occurred which stained the back of his head, neck and upper shoulders." (Emphasis added) (Warren Commission, 6H29)

In answer to a question from Warren Commission's Arlen Specter about the survivability of Kennedy's head wounding, Clark said: "...the loss of cerebellar (sic) tissue would probably have been of minimal consequence in the performance of his duties. The loss of the right occipital and probably part of the right parietal lobes would have been of specific importance..." (Warren Commission, 6H26). That Clark, a neurosurgeon, specified that the occipital lobe of the brain was missing cannot suggest anything but a very posterior defect.

⁸ Including 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. References available by request.

⁹ Artist's diagram appears on page 234 of Volume I of the Hearings before the Select Committee on Assassinations of the U.S. House of Representatives, Ninety Fifth Congress. Bootleg copies have been widely published elsewhere.

¹⁰ Loftus, Elizabeth F. Eyewitness Testimony. Cambridge, Harvard University Press, 1996, p. 25 - 26. "Items that were highest of all in salience ("salience" being determined by the witnesses themselves) received accuracy and completeness scores of 98. Those that were lowest in salience received scores below 70." Please note that an item judged not to be salient at all, i.e. "Salience category 0.00," was still accurately recounted 61% of the time. See enclosed.

See also the study to which Loftus refers, Marshall, J, Marquis, KH, Oskamp, S. Effects of kind of question and atmosphere of interrogation on accuracy and completeness of testimony. Harvard Law Review, Vol.84:1620 - 1643, 1971.

¹¹ Select Committee on Assassinations of the U.S. House of Representatives, Ninety-fifth Congress, Second Session. V.VII:37 - 39.

¹² HSCA V.7:41, ref. # 5.

¹³ Breo, Dennis. JFK Part II. JAMA. 5/27/92.

¹⁴ HSCA interview with Curtis Jenkins, Jim Kelly and Andy Purdy, 8-29-77. JFK Collection, RG 233, Document #002193, p. 4.

¹⁵ Warren Commission Exhibit, CE#1024, V.18:744 (18H744).

¹⁶ HSCA record # 180-10105-10397, agency file number # 014461, p.2.

¹⁷ HSCA record # 10010042, agency file # 002086, p. 2

¹⁸ Michael Baden, MD, may be reached at 518-457-8678, FAX - 457-4220. Cyril Wecht, MD, JD, may be reached at 412-281-9090., FAX - 261-3650.

¹⁹ HSCA rec. # 180-10093-10429. Agency file # 002070, p. 11. Stringer apparently was not satisfied with the explanation given him for the missing photos, for the HSCA reported, "He (Stringer) noted that the receipt he had said some of the film holders (sic) had no film in one side of the cassettes. He said the receipt said this happened in two or three of the film holders where one side only was allegedly loaded. He said he could understand it if the film holders were reported to have poorly exposed or defective film but could not believe that there were any sides on the film holders which were not loaded with film...."

²⁰ A. Purdy. HSCA rec. # 180-10093-10429. Agency file # 002070, p. 2.

²¹ HSCA record # 180-10093-10429, Agency file # 002070, p. 17.

²² HSCA Agency file # 002070, p. 7.

²³ HSCA V.7:253-254.

²⁴ Warren Commission Vol. II:363.

²⁵ A. Purdy. HSCA rec# 180-10093-10430. Agency file # 002071-p. 6

²⁶ A. Purdy. HSCA, JFK Collection. RG #233, file #002198, p.5.

²⁷ David Lifton, Best Evidence, p.638.

²⁸ HSCA Rec. # 180-10081-10347; agency file # 006165, p. 8.

²⁹ HSCA Vol.7:246-261.

³⁰ HSCA interview with Finck, p.90-91. Agency File 013617. (Another witness supported Finck's contention that he had worked with the photographer that night. Dr. Robert Karnie, MD, a Bethesda pathologist who was present during the autopsy, was interviewed by the HSCA. It reported, "He [Karnie] said he does 'remember him [Finck] working with probes and arranging for photographs.'" - HSCA Agency File # 002198, p. 6.)

³¹ Warren Commission Vol. II:363. (Contributed by researcher Barbara Junkkarinen.)

³² From memo titled, "President Johnson's notes on Conversation with Acting Attorney General Ramsey Clark - January 26, 1967 - 6:29 PM." Obtained by Kathy Cunningham from the Lyndon B. Johnson Library. Copy available by request.

³³ HSCA Agency File # 014028, and HSCA Agency File # 002198, p. 5.

³⁴ *Report of Inspection by Naval Medical Staff on 11/1/66 at National Archives of X-rays and Photographs of President John F. Kennedy.* In: Weisberg, H., *Post Mortem*, p. 573.

³⁵ From: *Carl W. Belcher*, Chief, General Crimes Section, Criminal Division, US Dept. of Justice, 11/22/66. Agency: DOJCIVIL, Record # 182-10001-100021.

³⁶ From memo titled, "President Johnson's notes on Conversation with Acting Attorney General Ramsey Clark - January 26, 1967 - 6:29 PM." Obtained by Kathy Cunningham from the Lyndon B. Johnson Library. Copy available by request.

³⁷ p. 575-579.

³⁸ Reference copy, JFK Collection: HSCA RG 233.

³⁹ HSCA interview with Finck, p. 89. Agency File 013617.