

ORAL HISTORY COLLECTION

Narrator George G. Burkley Address 3507 Preston Ct.  
Chevy Chase, Md.

Biographical information:

Physician; naval officer; b. Pitts., Aug 29, 1902; B.S., U. Pitts., 1926, M.D., 1928; postgrad. U. Minn., 1929-32; Intern St. Francis Hosp., Pitts., 1928-29; resident fellow internal medicine Mayo Clinic, 1929-32; fellow cardiology U. Pitts., 1933-34, asst. prof. medicine, 1934-41; practice medicine, specializing internal medicine and cardiology, Pitts., 1934-41; commd. lt. comdr., M.C. USN, 1941; advanced through grades to rear admiral, 1961; asst. physician to President Johnson, 1961-69.

Interviewer T. H. Baker

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Tape index:

Page or estimated time on tape	Subject(s) covered
1	Medical training background First medical activity concerning the White House
1,2	President Eisenhower
2	General Snyder; Dr. Tkach
3,9	Kenneth O'Donnell
3,4,5,6,7,8	Dr. Janet Travell
4	Dr. Eugene Cohen
4,6	Dr. Pep Wade
5,6,7,8	Dr. Hans Kraus

## Tape Index continuation sheet

George G. Burkey

Page or estimated time on tape	Subject(s) covered
9,10	Events in Dallas
11 11,12	Campaign travel with President Johnson Dr. Cain
12	Dr. Willis Hurst Robert McNamara Cyrus Vance
13	Marvin Watson George Reedy Admiral Brown
14	Dr. Taylor Dr. Canada
15	Juanita Roberts
16	Sergeant Glenn Sergeant Gaddis
17	Dr. James Young Dr. Lay For
18	Dr. William Voss Dr. William Lukasch
19,20	Traveling arrangements in Ft. Worth-Dallas with President Kennedy
21	Travel arrangements with President Johnson
23,24	Press relations

INTERVIEWEE: ADMIRAL GEORGE G. BURKLEY

INTERVIEWER: T. H. BAKER

December 3, 1968

THB: This is the interview with Dr. George Burkley. Dr. Burkley, let me begin here by just outlining your career. Your medical training is at the University of Pittsburgh, and postgraduate work at the University of Minnesota, and you have been with the Mayo Clinic, and you've been a Fellow and a teacher at the University of Pittsburgh. And since 1941, you've been in the Navy Medical Corps. Now, with that as a background--

B: Well, now in 1945 I went out and returned to the Navy in 1946 to become a regular, if you want that in.

THB: Yes, thank you. When then was your first association with the White House as a physician?

B: My first association with any activity concerned with the White House was in about 1956, at which time I was requested by Admiral Hogan, Surgeon General of the Navy, to accompany President Eisenhower on any trips to Camp David, or to Gettysburg when Camp David might be involved in his trip to that area. This I agreed to do. I was then assigned as Commanding Officer of the Naval Dispensary on Constitution Avenue, Washington, D. C.

My visits to Camp David were on frequent weekends and occasionally visiting when dignitaries such as Khrushchev and de Gaulle and various other people were seen at the Camp David area. This continued and in 1959, at the time the President [Eisenhower] was planning this eleven-country tour, I was asked to go with his party with my chief duty to

take care of the press. Dr. Tkach, Colonel Tkach, who was with General [Howard] Snyder, was unable to attend this trip because of commitments with Mrs. Eisenhower who was not going to accompany the President.

THB: That's the General Snyder who was Eisenhower's physician?

B: General Snyder, of course, was on this trip and had definitive care of the President and his family. However, I was privileged to see some of the Eisenhower family and immediate party on occasion. The trip lasted, I believe, twenty-three days.

THB: Was your choice for that kind of position based on the fact that you are a cardiologist?

B: I feel that my choice to fill that position was on a basis that I was an internist and would be conscientious in my duties and requirements. Cardiology, of course, was in my background which may have been a factor, although I had no direct or indirect care of President Eisenhower. This function was completely under the jurisdiction of General Snyder and his associate, Dr. Tkach.

On one occasion I accompanied General Eisenhower from Camp David to the farm in Gettysburg because there was a question of whether Tkach could get there in time to cover this activity. However, Dr. Tkach met us at the farm and took over from there. While on the trip to the eleven countries, I had no call to be of any personal assistance to President Eisenhower.

THB: Then, sir, after the election of John F. Kennedy as President, what was your status?

B: The election of John F. Kennedy was general news and information to all of us, and I felt that my association in any regard to the White House

area would probably be terminated. However, within the first week when President Kennedy flew by helicopter from the White House lawn to Andrews [Air Force Base] to greet the two American flyers who had been held by the Russians for a period of six months, I was asked to accompany him on that trip.

When I arrived at the White House and was to be briefed and the following day before the trip to Andrews, I was asked by Mr. [Kenneth] O'Donnell to become a part of the White House staff as assistant physician to the President.

THB: Had you known Mr. Kennedy before then?

B: I had no knowledge, had never actually seen President Kennedy in person, and I knew none of the members of his staff. I told Mr. O'Donnell that as far as I was concerned, I was perfectly willing to assist in any way but I did not feel that it was just until they knew more about me to have me appointed. My idea was it's much easier to not appoint and to get rid of somebody if it would not be satisfactory. From that day on, I did come to the White House and cover certain activities which were more familiar to me than to other members of the medical group.

THB: Dr. Janet Travell was serving at that time as physician to the President, was she not?

B: Dr. Janet Travell had been appointed as physician to the President and I met her and worked with her in this care of the President. It was about the following Tuesday that Mr. O'Donnell again stated that they were having many requests for a friend who was a good doctor and they would like to finalize this appointment. The appointment was announced from the President's office. I was not actually assigned here by the Navy; I was appointed rather by the President and the Navy concurred my appointment.

THB: Then, sir, you were telling me before we started the interview the circumstances of Dr. Travell's leaving her position as physician to the President. Would you like to record something of that?

B: This is a subject which I do not like to discuss. However, I feel that in view of certain books that have been published [i.e., Dr. Travell's book] and comments that have been made, the record should be cleared at some future date.

Shortly after arriving at the White House, I was somewhat surprised at the methods employed by Dr. Travell. I felt that the treatment was excessive and was not well directed.

THB: Was this primarily the treatment for President Kennedy's back trouble?

B: This was the main cause of concern. I discussed this with some of the doctors who had known President Kennedy before, namely Dr. Eugene Cohen of New York and Dr. Pep Wade who is a surgeon in New York and was the surgeon involved in the actual surgical procedures on President Kennedy at the previous date. Both of them concurred in my opinion. However, there was no opportunity to actually have this type of treatment terminated at that time. However, within a month or so, I broached the subject and there was discussion with Dr. Travell and Dr. Cohen and we [Cohen and Burkley] mentioned forcibly that this should be used less frequently and with more discretion.

THB: What precisely was this treatment that Dr. Travell was using?

B: Dr. Travell is very adept at the use of procaine injections. She is very well able to detect muscle spasms in various areas and is actually accomplished in that phase of medical practice. However, it was a consensus that the actual procaine injections could be curtailed by other means. And Dr. Cohen, who is at the New York Hospital and is

better familiar with medical procedures at Cornell and generally in the city, recommended to me that Dr. Hans Kraus, who is an orthopedic surgeon and is now limiting himself to physical medicine, would be a great help to have him actually manage the physical exercise program for President Kennedy. This was brought to Dr. Travell's attention, and she was requested, being the senior physician at the White House, to contact Dr. Kraus and ask him to come to see the President. There were various delays and it was at least two or three months before any action was taken, and that was taken only after Dr. Travell was informed that if she did not call Dr. Kraus, he would be called without her consent.

This period following Dr. Kraus' arrival was a very productive one as far as President Kennedy and his back problems were concerned. An exercise program was instituted. I had secured the help of a Navy chief [petty officer] who was adept in physiotherapy and was actually a graduate of the physiotherapy school at the Mayo Clinic and was a graduate nurse from St. Vincent's Hospital in New York. With his aid and the supplement of several other chiefs from the Navy, we established a program of exercise which was carried out religiously each day. The President also enjoyed swimming and he employed this relaxation to great advantage.

THB: So in layman's terms, is this the difference between therapy and medication?

B: Yes. Well, it's medication, but it's medication without medicine. It's actually medication by muscle training and strengthening by exercise. Dr. Kraus would come to the White House at regular intervals, quite frequent at first and then lengthening them, and his progress was remarkable.

However, through some means the President's confidence in his ability to carry on was somewhat shattered and at Christmastime of 1961 in Palm

Beach, I had Dr. Pep Wade, Dr. Hans Kraus, and myself present at the Kennedy home, and Dr. Travell had come down on her own. She had been asked by Ken O'Donnell to leave the White House in, I would say, sometime in the summer of 1961, which she did not choose to do. And at this time she was there also on her own. I had Dr. Wade examine President Kennedy separately, then Dr. Kraus saw him, then the four of us went into the President's bedroom. Dr. Pep Wade stated that he was amazed at the progress and development of the muscles and that the ability that the President had improved at least 50 percent during the time of Dr. Kraus' manipulation.

At this meeting Dr. Travell, in the presence of the doctors mentioned, was told that she would have nothing to do with the care of the President in any way; that if any procaine injections were indicated they would be at the direction of Dr. Kraus or myself.

THB: Was she told that by Mr. Kennedy himself?

B: She was told that by--Dr. Kraus brought this up and it was concurred in with the President. Following this, his progress was steady and at one time in the spring--my office was in the west basement and her office was in the mansion--I was informed that she had gotten the President in and given him an injection. I came to her office and told her in no uncertain terms that she should desist. She said, "Well, this was not in his back; this was in his arm and shoulder."

And I said, "Well, it makes no difference where the injections are. You are not to participate in that unless it is authorized by Dr. Kraus or myself."

She remonstrated with me. She said, "George, you're talking so high that everybody can hear you." And I said, "I don't care who hears me."

If you interfere in any way in the future, there'll be more stringent action taken."

That was the only time in my career with Dr. Travell that we had any words other than ordinary words in conversation. To my knowledge, she had no further contact with the President other than occasionally saying hello as he went by.

At one point, when we were at Palm Beach the following year, some question came up, and I mentioned that Dr. Travell was trying to have such and such done, and he said, "Do you ever do anything that she tells you to do?" And I said, "No," that I had followed my own directions in all respects. He said, "That is exactly as I want it."

Another occasion when Dr. Kraus was at Palm Beach, the President again reiterated that he wanted us to take care of him and her to have no care at all.

THB: Sir, you mentioned just before Christmas there--you used the phrase that the President's confidence had weakened. Did you mean his confidence in the outcome of the therapy?

B: The confidence had weakened in the outcome of the therapy which was being directed by Dr. Kraus. It was a personal feeling that this was by innuendos from another source, and I have no--

THB: You mean possibly from Dr. Travell?

B: Well, that was the--I mean there was another source that was making a slight innuendo here and there that things could have worked in another way. One of my regrets is that we never had a moving picture of Dr. Kraus' management of the President's activity. He [Kennedy] actually went through a series of exercises which would do credit to a gymnast and was very pleased with his own progress.

Many times comments had been made in the newspaper by the press and so forth that the President's back was bothering him. I remember at one time when we were on a carrier on the West Coast, I came out, the President looked tired and his back was bothering him. I happened to know that he had left his quarters and gone up and walked to the top of the tower when the elevator was available right next to the stairs, and he not only had done this once but several times. And the press came out that his back was bothering him. I think many times the backs of the press were bothering them and they interpreted it into the President's physical well-being.

THB: There was talk at the time that President Kennedy was often in pain from that injury, from his back trouble. Is that correct?

B: I am sure that President Kennedy's back caused him some distress. The episode in Ottawa precipitated a period when he had more distress than he usually had.

THB: That was the tree-planting ceremony?

B: That was the tree-planting that was referred to there. I think most of the time that the President, although he was probably not as comfortable as a perfectly normal back but that the pain level was not sufficient that it interfered with his usual activities.

THB: Is it correct then that, for all practical purposes, from about the fall of 1961 on, you were in fact the President's physician, although not necessarily in title?

B: That is absolutely true. I had taken care of all medications that the President received from around June or possible early July of 1961. We were able to get Dr. Kraus in, I believe it was in August of 1961, and from that point on Dr. Travell had no management, and I was in fact

the physician to the President. In actual time-scheduling, on May 16, 1963, Ken O'Donnell had informed Mr. [William] Hopkins [Executive Clerk, White House] that my name would be inserted in the next Congressional Record as the President's physician.

THB: But you had actually been performing that function considerably longer than that?

B: Yes.

THB: Sir, to move on in time, I know you've made a tape similar to this for the Kennedy Library program, which I believe you said mostly covered the assassination.

B: That is true.

THB: And may I ask here too, for the record, are the direct references to you in William Manchester's Death of a President generally accurate?

B: I have never actually read Manchester's book. My wife has read the excerpts, and I feel that they are essentially true as far as I am concerned.

THB: Then, sir, to deal with one aspect of that tragic time, you were on the plane--on Air Force One--there at Love Field in Dallas and coming back, were you not?

B: That is true.

THB: One thing that there has been a good deal of speculation about, perhaps deriving from Mr. Manchester's book, is the allegation that there was on that plane a good deal of animosity between Kennedy groups and Johnson groups. Did you have any notice of such?

B: I have no personal knowledge and had no feeling at the time that there was a marked friction or, for that matter, any precise friction between the so-called two groups.

When I arrived [from Parkland Hospital] with the President's body and was on the plane in the compartment for the staff, rather than the Presidential area, President and Mrs. Johnson came from that portion of the plane to the Presidential area, passing me. Mr. Youngblood--Rufus Youngblood--was following the President as he had during that trying period. I told Rufe, I said, "I am here; I will be willing to do anything I can for the President." That was the only direct contact I had with President Johnson, Mrs. Johnson, or Mr. Youngblood. However, I was present in the cabin at the swearing-in ceremony and at that time also everyone was so crushed that if there was animosity, I interpreted it as simply the effects of the catastrophe which had overtaken us.

THB: Did you or anyone else at that time give President Johnson a medical check; that is, did it occur to anyone that here was a man with a history of heart trouble--?

B: I did not have any direct contact with President Johnson and to my knowledge, no other physician saw him or Mrs. Johnson.

THB: Then, sir, did you perhaps assume that as John Kennedy's presidential physician, you would be replaced?

B: I had no knowledge of what would happen. I had been appointed by President Kennedy, and my first action on arriving at the White House was to put in a request to resign. I spoke to Mr. [Walter] Jenkins, who asked me to remain, and I felt that with so many changes and with the pressure of events that it would only be fair to remain in my position until they had time to make further plans. I again went to the assistance of the President and expressed my desire or willingness to depart at the wishes of the President on at least three occasions during the following year. Each time I was requested to remain in my position.

THB: Did Mr. Johnson himself ever directly ask you to remain, or tell you that he would like you to stay on?

B: In that year before the election [of 1964] no such discussion occurred. I accompanied President Johnson throughout his campaign on every movement and every activity that he had in that period. The day after his reelection I spoke to the President and put in a formal request to resign from the position. The President made no direct comment at that time except to say that he would like me to secure the names of a number of physicians to be considered. This I did, some fifteen in number--five from each of the services, with their complete medical background--and to a degree social background, which was not essential primarily. This I gave to the President and he evidently studied it quite seriously.

Several weeks later I was in his bedroom, Mrs. Johnson was there, and the President asked me to have a seat and he stated that he had gone over the names and the credentials and that he would like to have me stay on if Mrs. Burkley would be satisfied. Mrs. Johnson concurred in this opinion; I said that I would ask my wife, and I did. She said that she knew that I would be wanting to be active and that she would put up--she had been through this so long and she was satisfied to continue. I told the President that and he seemed pleased.

There was one element which I did not mention earlier and that is as soon as President Johnson was back in Washington [after the assassination], within the next twenty-four hours, I called Dr. James Cain of the Mayo Clinic and asked him to come over and take over as physician to the President. He said he was willing to help in any way; however, he did not feel that he could assume the direct duties.

THB: May I insert here for the record--you called Dr. Cain, I presume, because Dr. Cain had been in the past Mr. Johnson's physician?

B: As I understood the situation. I had never met Dr. Cain, but I knew that he had been associated with President Johnson's family and more or less their family physician for a number of years and was a personal friend.

I then called Dr. Willis Hurst from Atlanta, a physician who had been in the Navy and at Bethesda at the time President Johnson had his heart attack in 1954 [1955] and that Hurst had seen President Johnson from time to time since that time. I also asked him the same question, if he would come up and assume the position as physician to the President; he more or less stated that he was busily engaged in his work at medical school and did not feel that he could sacrifice that and would be willing to cooperate at any time.

Both of these doctors have been most helpful and most cooperative since that time.

THB: There's a story that's told about the period there in 1964, I believe, about President Johnson getting you a promotion. Is that correct?

B: I had been appointed Rear Admiral by President Kennedy and at the time of this discussion as to whether I would remain with President Johnson in 1964, he made a comment at the time that he asked me to stay. And I did not quite get the connotation. However, about a week later he asked me if Mr. [Robert] McNamara had contacted me. And I said, "No." He said that he thought he was pretty busy. This occurred in the President's office about 5:30 of an afternoon. I had seen him for some trivial matter. By that I mean trivial, I mean not medically important. The President called Mr. [Cyrus] Vance, and I was standing there and had, as usual, had my ears as closed as possible, but when I heard him mention my name, I was attracted to what he was saying. He told Mr. Vance that

he wanted me promoted to Vice Admiral and he wanted it done with dispatch. This was about 5:30 in the afternoon; I was called by Mr. [Marvin] Watson around 7:30 to say that the papers had arrived in his office, and he called me back about 8:30 to say that they had been signed.

The following morning I was again in the little office behind the President's office. I thanked him for the promotion and he said, "Well, I'm going to announce this to Mr. [George] Reedy for the press when I'm finished with this meeting." I knew that it was a short one involving a few people, and so I called Admiral Brown's office, who was the Surgeon General, to make sure that he knew in advance that this was going to come over the wire. This was given to the press at that time. And Mr. Johnson had appointed me to a position which was only equalled at one other time, and that was during the Roosevelt Administration when his physician was made a Vice Admiral.

So I then, as far as military was concerned, was senior to the Surgeon General of the Navy which made no difference because our fields were entirely different and I consider myself as a physician rather than a Naval officer in most of my activities.

THB: Sir, when you are in that situation and you find yourself through the acts of fate with a new and very important patient on your hands, do you then try to find out all you can about the detailed medical history? And how do you go about doing this?

B: Well, the actual medical care of the physician of the President is--our primary duty is to the President, Mrs. Johnson, and members of the family, to be sure that they are adequately covered. As far as President Johnson was concerned, I had a detailed history of his past medical occurrences and was very familiar with those. Of course, I had some knowledge of

this even before, while he was Vice President, because on one occasion I had some knowledge that he had a problem and had called some help-- particularly a respiratory problem--and had Dr. Taylor and Dr. Canada from the Naval Hospital see him at his home in Washington.

THB: Then you had no difficulty in taking over the care of Mr. Johnson?

B: No medical difficulties for the simple reason that the President's health at the time of his assuming the Presidency and since that time has been essentially very good. He has had several problems, one the question of respiratory infection and subsequently the discovery by me of the gallstones which were subsequently proven to be present on X-ray, and then the occurrence of a hernia at the site of the surgery. Aside from that, the President's health has been excellent.

THB: Do you try to keep the President on a health regime: diet, rest, that kind of thing?

B: A question of diet has been brought up in the newspapers and in various other places. The President, unfortunately, has a weight problem and he himself is anxious to stay within a prescribed limit. When he decides definitely to be on a diet, he is most vigorous and most faithful; however, due to the position he is in, many times it is almost impossible to adhere to a close diet. His weight has fluctuated from time to time, been down under 200, and has gone higher than that most of the time.

THB: Do you find him a good patient? Does he take advice easily?

B: In my estimation, I think he's an excellent patient. He has been cooperative and sometimes it's hard to carry out some procedure that you might want to do because of the press of other activities; however, as far as personal relationships and cooperation, I am pleased and have been pleased.

THB: Do you get Mrs. Johnson's help in helping him to stick to his diet and so on?

B: Mrs. Johnson has been helpful and works along with it. His secretary, Mrs. [Juanita] Roberts, is a dietician and at the time of his heart attack, she and he worked out a series of diets which he adhered to and lost weight consistently. On several occasions she has entered into the question of diet and has worked out a series of menus which are helpful.

THB: How about this unusual work day the President has, of what amounts to a full day of work and then an in-bed nap and then almost another full day of work? Is the nap your suggestion or is that the President's habit?

~~B: Well, it would be my suggestion and I'm sure has been my suggestion, but~~  
it was more or less built into his schedule when he arrived at the White House that there would be a break in the afternoon, usually from one to two o'clock until four-thirty to five. And this has been extended sometimes later than that, and he has been, except under periods of great stress, fairly consistent in adhering to this.

THB: Is that medically effective?

B: I feel that it has been, because his physical condition has remained well within normal range throughout that period. On one occasion, when I knew that it had been pretty strenuous with long hours due to one of the stress periods, I arrived at his room and both he and Mrs. Johnson were there and they sensed that I was ready to lay down the law about getting some rest. And I checked him over and everything was well within normal limits, and my face expressed my relief of concern but removed my cause for being so strict. We all laughed about it, and he did rest and I can say without question that he has attempted to secure adequate rest which may not be sometimes what you would like, but it is

within a range of compatibility with his general well-being.

THB: Do you check the President daily? That is, do you have, say, every morning a certain routine test?

B: My feeling about both President Kennedy and President Johnson--that President Kennedy was and that President Johnson is essentially a normal individual. Personally, I would be perturbed if everytime I turned around there was a doctor poking me or doing this or that or the other thing. However, through various means, I have maintained a constant supervision of the President. There are people around the President, such as two Air Force sergeants, Sergeant Glenn and Sergeant Gaddis, who personally observe his general well-being. The men in my own office, who see him daily for any massage or treatment of that sort, also are keen observers and any other area which might feel there was cause to be a little closer check on him.

THB: If they notice anything, they get in touch with you?

B: They get in touch with me and give me a report. Not only that, but I usually inquire how things go; we keep a record of each night that he's seen by one of the corpsmen. And with that and other indications, I have a very close check on the President. We do not check on his personal activities, but his physical activities we know very well.

THB: How often do you yourself see him?

B: I see him at least once a week when I personally contact him and check him over, not a detailed examination, but sufficient to know that the medical condition is satisfactory. Approximately every three months, we have arranged to have a complete blood study and cardiogram for record purposes as much as anything else, but to be sure that everything is satisfactory.

THB: You can do all of that here then? It doesn't require a hospital visit?

B: We have facilities here to do all of that. In addition to that, we have an X-ray unit which I have installed and the installation was just completed within a week of the time that we had necessity to get gall bladder X-rays, which were done here and were perfectly satisfactory.

THB: Do you make yourself available in the stress periods you were talking about; that is, if you know there is going to be some kind of all-night meeting, do you come to the office to be on hand?

B: I am available twenty-four hours a day and have been called at any time throughout the twenty-four hours. I have with me two physicians, both of them very competent, and we more or less rotate on the long hours that are necessary to meetings and social events. Some one of either myself or one of the staff is always in the White House during the waking hours up until the time that it's definitely finished as a working day; and in that working day are included banquets and activities of that sort.

THB: I was going to say, it's conceivable a working day could be well into the night if there were meetings or social engagements.

B: Yes, that is the nature of it.

THB: How big is your immediate medical staff?

B: I have two doctors with me. And I have had during the course of this procedure Dr. James Young, Commander Young, who is now on duty out at Oak Knoll, who because he felt that he could get more clinical work desired to be returned to active medical practice. And Dr. Lay Fox, Captain Lay Fox, who also was here and I felt that it would interfere with his career in the Navy to keep him here when he was likely to get an appointment which would be advantageous to him. He left and was appointed to be Chief of Medicine at the Naval Hospital at Bethesda,

which is a very coveted position.

I have Dr. William Voss who is here with me, Captain Voss, and also Captain William Lukasch. Each of these doctors has had additional duty at Bethesda. I felt that the work here was not of sufficient medical demand that these highly qualified physicians should be limited to this area.

Dr. Young had charge of one of the towers at Bethesda, "tower" meaning one of the floors on the tower; Dr. Fox continued his work in cardiology at Bethesda and Dr. Voss examines flag officers on Wednesdays each week and does some supervision in the tower area. Dr. Lukasch, who was a gastroenterologist, is in complete charge of the department of gastroenterology at the Naval Hospital at Bethesda and in addition to that, has instruction of residents in his field.

THB: Do you do any additional work of that kind yourself?

B: I have not, because I felt that this was of sufficient importance that I remained in this area. The present plan is that I come in early and stay in the day as long as indicated, and then late in the afternoon one or the other of these two doctors will relieve me and stay the evening. And the weekends are alternated either between them or myself so that there is complete coverage at all times.

Prior to the last year, I had done practically 90-100 percent of the White House supervisory work here and could continue; however, there is no reason why these other men should not engage in it. If there's any question of his well-being, I am here regardless.

THB: What is your relationship with the other physicians that are called in for specific things? For example, during the gall bladder operation and the hernia operation, others did those, did they not?

B: My feelings in regard to the physician of the President are two: one, that he himself should have background and experience which enables him to be fairly adequate judge of any problems which would arise; the other is that he should be at all times willing to call the best medical facilities available regardless of who they are or where they are; and to be sure that the President and his family are never subjected to the desire of one person to be the sole medical voice. This feeling has been very strong in me; I feel that I have as much duty to check my opinions with my peers rather than feel that I'm superior and God-like in my decisions. Because I feel that the President is not one who should suffer by any egotism of one physician. I have had 100 percent cooperation with all the Services and with civilian physicians who needed to be called for any reason.

THB: You always travel with the President, sir?

B: I have made it a point to travel with the President as much as possible up until, again, up until the last year or year and a half I made all trips with him out of the City of Washington. However, for the routine trips such as to Texas or some shorter trip, I have not accompanied him on all of these. However, any ones that have any significance, or any foreign trips; by significance, I mean where I felt there might be some added danger to the President or added stress to the President, then I have made it a point to be present.

THB: Does one of the other physicians from this office go on the routine trips?

B: Either one or the other will travel with him when I am not available.

THB: When you travel with the President now, do you travel close to him? I ask because there was some criticism at the time of the Kennedy assassination of your being back in the bus.

B: That is true, and it's one of the things that was very upsetting to me. When we were in Fort Worth, I traveled in the second car in the motorcade, and Mrs. [Evelyn] Lincoln and I were in the car. We got on the plane and went to Dallas, which I think was a twenty or thirty-minute flight, and on alighting I expected to have this same arrangement. In Dallas there was great confusion; the local people and political people were anxious to be in these first cars, and I remonstrated with the Secret Service who more or less controlled the motorcade and said I wanted to be in that car. And they said, "Well, they're all filled and you'll have to go into the VIP bus."

I said, "Well, I can go in the advance car," the one that precedes the parade. Well, actually the parade was in motion when I got off the back of the plane and--but since that time, I have never ridden farther back than the third car. That would be the President's car, the Secret Service car, and the staff car. Most of the time I ride in with the Secret Service, if there is room available.

On several occasions, someone has tried to push in and make it so that I would not be able to get in that car, and I can honestly say that that is the only thing that makes me very upset and practically go berserk: that I would not be close to the President.

THB: What kind of equipment do you carry when you travel?

B: I have all the possible medical needs that we have for the President, various pills if you want to call them, we always have. And various other supplementary medical advantages.

THB: When you're making a trip like some of these extended overseas trips, do you make prior arrangements in advance with military hospitals along the routes?

When any trip of any magnitude is planned, usually one member of my staff will go on the advance. If that is not possible, the Secret Service do locate all the hospitals and get a report on the medical coverage in those various areas. We alert the Services, the Army and the Air Force and the Navy, that the President will be in such areas; the medical facilities in those areas are notified that we will be there. His blood group and Mrs. Johnson's are given to those hospitals so if there are any accidents, the proper blood would be available. This is done without any fanfare and the public would not realize that this is in effect.

When the President was in South America and Central America, we had a Navy ship with a complete team available on that ship, with helicopter coverage, so that the actual augmentation of the medical needs would be a matter of minutes. In Punta del Este this was necessary because there was no adequate medical facilities in that area. And also on the trip to the Far East, usually there was Army or Air Force facilities available; however, in Malaysia we felt that the coverage might not be adequate and we requested that a Navy ship be again within striking distance with helicopters available.

THB: Do you have to take special precautions on trips like that about diet: food and water?

B: The President's food is always carried with him, his water supply is always brought along with him. Occasionally he is compelled by social graces to eat some of the food, but he adheres to the cooked foods which are relatively safe and that sort of thing is in full effect.

THB: Sir, to change the subject just slightly, has the President ever asked you for policy advice; that is, on things like Medicare and so on?

B: Not directly, no. Our relationship has been--. Things have been mentioned, but I have never entered into any great discussion as to what he felt should be done or should not be done in the broader field of medicine. I feel that Dr. James Cain, who has been on numerous committees, has filled this capacity much more so than I have.

THB: Another question, too, about which there has been and probably will be speculation. Do you have any knowledge of any health reasons behind Mr. Johnson's withdrawal from the Presidential race?

B: I have no knowledge of any health reason except that he is now sixty years old. His general health for his age is, I think, better than at least 70 percent or 80 percent of the men in his age group. He is active and his muscle development is good and is in good tone. His ability to perform under stress is excellent; he has had no indication of any slowing up process, and I personally do not feel that this was a question in his decision, although he knows and we all know that you do get older.

THB: Sir, is there anything else that you feel should be on a record of this sort?

B: Well, one thing: I've enjoyed my association with the President. He has been a good patient; he has cooperated, I think, within the bounds of his ability. There have been times that he has been unable to carry out some, and always minor, request, but it has never been a deliberate avoidance. When he hasn't done exactly as I would like him to do, it's because circumstances did not permit it.

THB: The President is known for having something of a temper in private. Have you ever felt that? Mr. Johnson's anger, it appears, can be awesome. Has that ever been turned on you?

B: No. I have never had him other than cooperative and gentle. I know that

he could, but there has never been any friction of any sort between the President and myself and he has never been purposely curt or made any comments which I could consider other than stress that he was under. And by that, I mean that sometimes I have waited to see him longer than I might hope to, but it has always been because he was engaged with other, possibly more important, activities, because my contacts with him have been--with the exception of the cold, the gall bladder, and the hernia--really almost of minor significance. And had I felt that it was important that I crash in on some other conference, from a medical standpoint I would not have hesitated to do that. I have never felt, except those three occasions, that it was necessary.

THB: There have been times when you have had to explain to the press these medical details, particularly at the times you mentioned. Have you found that difficult?

B: I am not a particularly good orator. I don't think my television appearances have added much to the programs. However, I never hesitated and have never been concerned about any such discussions. When I first arrived at the White House, some members of the press would try to ask pertinent questions and if you've had any dealings with the press, you know that by answering "no" you may say "yes" to something because of the way they word it. I have made a point of not discussing any of the President's medical situation with the press directly, unless the President himself has stated that he wanted me to meet the press.

THB: Has he done so?

B: He has done so on three or four occasions, particularly while he was a patient with his gall bladder and the removal of a kidney stone, and also when he was under treatment for the cold. Other times, if the

press directs any questions through the press secretary, I will answer those questions through the press secretary. Actually, this is the only protection that I would have from numerous calls and questions which I'm sure would be misquoted in many instances.

THB: Anything else, sir, that we ought to cover?

B: I think we've done a pretty good job, probably talked more about the President personally than I have at any time in the past.

THB: We appreciate it. Thank you very much, sir.

Another question has just come up, sir. What's going to happen after January 20 [1969]?

B: This has been of concern to me inasmuch as I will not be in a position to accompany the President after that date. I feel that his plans are to return to Texas. We have had the pleasure here at Bethesda of adding to his comfort and assurance medically. I have contacted the Surgeon General of the Army and the Brooke Army Hospital at San Antonio which I had checked out the first day of my first visit to Texas to see if they had the required facilities that I thought were necessary, which they have. And I have plans evolved whereby they will be available at all times to take medical action for the President. I have also planned, if the President desires, to accompany him to the Ranch after January 20 and for a period during that time to bring to the Ranch at least two of the medical officers who are likely to be involved in the care of the President and have them establish a routine appearance at the Ranch to check him over, more or less as I have done in the past five years.

THB: That's a courtesy or a right of an ex-President, isn't it--continued medical service? I'm uncertain about the law.

B: It is a combination of a courtesy and I think it is also a right. I'm

not sure of the actual acts of Congress or designation by the Department  
~~of Defense as to this factor. However, I feel that it is covered from~~  
the standpoint of a right of the President--to take care of the President  
and the First Lady.

THB: I would say that the comparison of former President Eisenhower would not  
be apt since he is also a retired military officer.

B: That is right.

THB: Thank you, sir.

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