BARKER: What about this wound that you observed in the -- in the front of the President’s neck? Would you tell me about that?

PERRY: Yes, of course. It was a very cursory examination. The emergency proceedings at hand necessitated immediate action. There was not time to do more than an extremely light examination.

BARKER: There’s been a lot said and written about was this an exit wound, or an entry wound? Would you discuss that with me, sir?

PERRY: Well, this is a difficult problem. The determination of entrance or exit frequently requires the ascertainment of trajectory. And, of course, this I did not do. None of us did at the time. There was no time for such things.

The differentiation between an entrance and exit wound is often made on a disparity in sizes, the exit wound generally being larger, in the case of an expanding bullet. If, however, the bullet does not expand -- if it is a full-jacketed bullet, for example, such as used commonly in the military, the caliber of the bullet on entrance and exit will frequently be the same. And without deformation of the bullet, and without tumbling, the wounds would be very similar - and in many instances, even a trained observer could not distinguish between the two.

BARKER: Did it occur to you at the time, or did you think, was this an entry wound, or was this an exit wound?

PERRY: Actually, I didn’t really give it much thought. And I realize that perhaps it would have been better had I done so. But I actually applied my energies, and those of us there all did, to the problem at hand, and I didn’t really concern myself too much with how it happened, or why. And for that reason, of course, I didn’t think about cutting through the wound - which, of course, rendered it inviolate as regards further examination and inspection. But it didn’t even occur to me. I did what was expedient and what was necessary, and I didn’t think much about it.

BARKER: You did not turn the President over?

PERRY: No, there was no reason to. There was not time at that problem, and there was really no reason to. It made very little difference to me, since my immediate concern was with an attempted resuscitation.

CROKITE: The nature of the throat wound can no longer be verified, for no records were made and no pictures taken before Dr. Perry cut through it in an attempt to relieve his patient’s breathing. The doctors at Parkland were engaged in a desperate struggle to keep the President alive; all else was secondary. But their task was impossible. One of the shots had virtually destroyed the President’s head. Even as the doctors worked, the President died.
At the hospital the scene was turbulent and disordered. The press and public were clamoring for news. Dr. Perry was rushed from the emergency room to a news conference, where he was badgered into giving a description of the wounds.

The neck wound, he told the press, looked like an entry wound, and he pointed to the front of his neck. In the transcript of that news conference there's no doubt that Dr. Perry made it sound as if he had a firm opinion. Well, the reporters flashed the news, and in that moment of confusion and misunderstanding established once and for all in the minds of a great many people a conviction that at least one bullet had been fired from the front to the motorcade.

Legally, the dead President was now just another part of the evidence in a Texas homicide case. The murder had been committed in that state, and there were no laws which gave the federal government jurisdiction.

In his book, "The Death of a President," William Manchester describes a scene of almost horrifying confusion, in which the Dallas County Medical Examiner tried to prevent the removal of the President, and Kennedy aides almost literally bulldozed his coffin out of Parkland Hospital.

During the flight to Washington it was agreed that an autopsy had to be performed, and Manchester writes Mrs. Kennedy chose Bethesda Naval Hospital because her husband had been a naval officer.

The autopsy was performed by the Chief of Pathology, Commander -- now Captain James J. Humes; Dr. J. Thornton Boswell; an Army Lt. Colonel, Pierre Finck, a forensic pathologist. They reported in a document reproduced in the supplementary volumes of the Warren Report that the President's wounds were inflicted from the rear. As part of standard procedure, they had photographs and X-rays taken as they proceeded.

Confusion continued at Bethesda, as it had reigned at Parkland. F.B.I. agents submitted a report, later disclosed in Edward J. Epstein's book, "Inquest," which said they had heard one pathologist state that he had found a wound in the President's back, and could not find an exit.

The Warren Report version was explicit, that there was no wound in the back, but one in the neck. However, details of these published sketches tended to indicate that there was a wound below what could be described as the neck.
But first, the observations of Dr. Wecht, whom we heard earlier.

WECHT: This sketch that was made by Dr. Boswell, Mr. Rather, is a very important sketch. It shows the bullet hole which he diagrammed in at a point approximately several inches below the collar level, although he does give other measurements to the side - which would place it at a higher level.

RATHER: Now, the Commission Report accepted that the bullet entered very near the neck, did it not?

WECHT: Yes. Take a look at this sketch, if you would, please. This was made by a medical illustrator at Bethesda Naval Hospital. This sketch shows the one that was accepted by the Warren Commission. It shows the point of entrance in the back at a much higher level, and it shows the point of exit again at approximately the level of the knot of the tie. You can then see why it was very important to accurately determine whether or not the bullet wound in the back was at this point, or whether it was five and a half inches below the collar level.

CRONKITE: Since the X-rays and films were turned over to the archives, Captain Humes has re-examined them. And tonight, for the first time, he discusses with Dan Rather what is contained in them.

RATHER: Commander -- now Captain Humes, have you had a look at the pictures and X-rays from the autopsy since the time that you submitted them to the Warren Commission?

HUMES: Yes, Mr. Rather, we have.

RATHER: And do you have any different conclusion, any different ideas, any different thoughts now, after seeing them again, than you had at that time?

HUMES: No, we think they bear up very well, and very closely, our testimony before the Warren Commission.

RATHER: How many wounds in the President's body?

HUMES: There were two wounds of entrance, and two of exit.

RATHER: And the two wounds of entry were where?

HUMES: Posteriorly, one low in the right posterior scalp, and one in the base of the neck, on the right.

RATHER: Let's talk about those two wounds, Captain. Both of these are blowups from the Warren Commission Report, these sets of drawings. Now, there are people who think they see discrepancies in these two drawings from the Warren Commission Report, in that this drawing shows the - what you called an entry wound at the base of the neck of the President - shows
it to be, or seems to show it to be, in the upper back, near the shoulder blade - considerably below the base of the neck. Whereas, this drawing does show the entry wound to be at the base of the neck. Now could you talk about these, and reconcile that?

HUMES: Yes, sir. This first drawing is a sketch that -- in which the outlines of the figure are already prepared. These are on sheets of paper present in the room in which the examination is conducted, and are routinely used to mark in general where certain marks or scars or wounds may be in conducting a post mortem examination. They are never meant to be accurate or precisely to scale.

RATHER: This is a routine in -- in preparing autopsy reports, to use this kind of drawing, and at this stage for them not to be prepared precisely?

HUMES: No. No precise measurements are made. They are used as an aide memoire, if you will, to the pathologist as he later writes his report.

More importantly, we feel, that the measurements which are noted here at the margins of the drawing are the precise measurements which we took. One states that -- we draw two lines, points of reference -- from bony points of reference. We note that there were -- the wound was fourteen centimeters from the tip of the right acromion, and fourteen centimeters below the tip of the right mastoid. Now the acromion is the extreme outermost portion of the shoulder. The tip of the mastoid is the bony prominence just behind the ear. And where these two lines intersect was, in actuality, where this wound was situated. And if we would try and draw that to scale, which we weren't trying to do as this mark was made, this, I think, would appear a little bit higher.

RATHER: Now, you examined this whole area of the back?

HUMES: Yes, sir.

RATHER: Were there any other wounds except one at the base of the neck, and one up in the skull?

HUMES: No, sir, there were not. Now the second drawing, which you mentioned, was prepared as we were preparing to testify before the Warren Commission, to rather schematically and as accurately as we possibly could depict the story for the members of the Warren Commission.

RATHER: In this drawing you were trying to be precise?

HUMES: Yes, sir, we were. We were trying to be precise, and refer back to our measurements that we had made and noted in the margins of the other drawing.
Also, of course, since this time we have had opportunity to review the photographs which we made at that time. And these photographs show very clearly that the wound was exactly where we stated it to be in our testimony before the Warren Commission, and as it is shown in this drawing.

RATHER: Your re-examination of the photographs verify that the wounds were as shown here?

HUMES: Yes, sir, they do.

RATHER: About the -- the head wound ...

HUMES: Yes, sir.

RATHER: ... there was only one?

HUMES: There was only one entrance wound in the head, yes, sir.

RATHER: And that was where?

HUMES: That was posterior, about two and a half centimeters to the right of the midline, posteriorly.

RATHER: And the exit wound?

HUMES: And the exit wound was a large irregular wound to the front and side -- right side of the President's head.

RATHER: Now, can you be absolutely certain that the wound you described as the entry wound was, in fact, that?

HUMES: Yes, indeed, we can - very precisely and incontrovertibly. The missile traversed the skin, and then traversed the bony skull. And as it passed through the skull it produced a characteristic coning, or beveling effect on the inner aspect of the skull - which is scientific evidence that the wound was made from behind and passed forward through the President's skull.

RATHER: This is very important. You say the scientific evidence -- is it conclusive scientific evidence?

HUMES: Yes, sir, it is.

RATHER: How many autopsies have you performed?

HUMES: I -- I would estimate approximately one thousand.

RATHER: Is there any doubt that the wound at the back of the President's head was the entry wound?

HUMES: There is absolutely no doubt, sir.
CRONKITE: So the Chief Pathologist at the Kennedy autopsy, after re-examining the X-rays and photographs, states without the slightest qualification that the shots which killed the President came from the rear.

(ANNOUNCEMENT)


CRONKITE: In answer to our major question as to whether shots came from a direction other than the Book Depository Building, indicating other gunmen and a conspiracy, we have eye -- or ear witnesses inside the building saying the shots came from there. Now, Mr. Holland who was on the railroad overpass, here, insists that he heard a shot from here. And in Mark Lane's book, "Rush to Judgment," he writes that 58 out of 90 people who were asked about the shots thought they came from the grassy knoll.

Now, expert opinions differ. All the experts agree that the shots could have come from the rear. But where some experts, such as Dr. Humes, say bluntly that they did, others -- such as Dr. Wecht -- find it highly unlikely.

CBS NEWS concludes that the most reasonable answer is that the shots came from the Book Depository Building, behind the President and Governor Connally. But if the shots came from the rear, and if there were only three of them, can all the wounds be accounted for? The President was struck at least twice. Governor Connally was wounded in the chest, the wrist, and the thigh. One bullet was recovered intact, as well as two large fragments. The Warren Commission concluded that of the three bullets fired, one missed entirely, one struck the President's skull and fragmented, and the third -- this one -- passed through the President's neck and went on to inflict all the Governor's wounds. This is the single bullet theory. And so we must ask: Could a single bullet have wounded both President Kennedy and Governor Connally?

Now, this is what the Report says: "Although it is not necessary to any essential findings of the Commission to determine just which shot hit Governor Connally, there is very persuasive evidence from the experts to indicate that the same bullet which pierced the President's throat, also caused Governor Connally's wounds. However, Governor Connally's testimony and certain other factors have given rise to some difference of opinion as to this probability but there is no question in the minds of any member of the Commission that all the shots which caused the President's and Governor Connally's wounds were fired from the sixth floor of the Texas School Book Depository."

Well, through the tortured English of that paragraph, a sentence that begins with "however," and has "but" in the middle, we can make out the Commission's struggling to paper over internal dissension. It's unfruitful to try to puzzle out the meaning of the statement.
Instead, we asked Arlen Specter, Assistant Counsel to the Commission, and now District Attorney of Philadelphia, and the author of the single bullet theory.

SPECTER: The possibility of one bullet having inflicted the wounds on both the President's neck and the Governor's body came in a very gradual way. For example, the first insight was given when Dr. Humes testified, based on his autopsy findings. And at that time it was made clear for the first time that the bullet that went through the President's neck hit no bone, hit no solid muscle. And, according to Dr. Humes, came out with great velocity.

Now, it was at that juncture that we wondered for the first time what happened to the bullet. Where did the bullet go? The probability is that it went into Governor Connally, because it struck nothing else in the car. That is the single most convincing piece of evidence, that the one bullet hit both men, because looking down the trajectory, as I did through Oswald's own rifle, and others did too, the trajectory was such that it was almost certain that the bullet which came out of the President's neck with great velocity would have had to have hit either the car or someone in the car.


Now, can you describe for us any other theory, besides the single bullet theory, that would support the conclusions in the Report?

SPECTER: The Commission concluded that it was probable that one bullet inflicted the wound on the President's neck, and all of the wounds on Governor Connally. But you could have three separate bullets striking under the sequence as we know them. For example, the President could have been struck at frame 186 of the Zapruder film, which is a number given to the Zapruder film. Then Governor Connally could have been struck some 42 frames later, which would be a little over two and a quarter seconds at about frame 228 or 229; and then the third shot could have hit President Kennedy's head at frame 313, which was pretty clearly established. So that it is not indispensable to have the single bullet conclusion in order to come to the basic finding that Oswald was the sole assassin.

CRONKITE: The Commission's dilemma lay in the fact that it had to choose between two unpalatable alternatives in order to make its case stand up. Having decided that three shots were fired, and having three sets of wounds to explain, the Commission could only find either that all three shots hit their marks, or that one of the three bullets hit two men.
But, if all three shots hit, then one of them would have had to pass through the President's neck, emerge at 1800 feet per second, headed on a downward path toward the midst of the Presidential car and the six people in it, and vanish in mid air, hitting nothing and leaving no mark. Well, this was more than the Commission could stomach. Despite its own words, the single bullet theory is essential to its findings.

The bullet was found after it rolled off a stretcher at Parkland Hospital during the tumult that followed the arrival of the two wounded men. The man who found it was Darrell C. Tomlinson, senior engineer at Parkland.

DARRELL C. TOMLINSON: There was a doctor that went into the Doctors' Lounge and he had to pull this stretcher out, the one I'd taken off the elevator, and whenever he came out he failed to push it back up against the wall, so I just stepped over and gave it a little kick to get it back in line, and then I turned to walk away and I heard a rattle, and I turned around and looked. I didn't see anything at that time, but I walked back over to the stretcher and there was this bullet was layin' there. So, I picked it up, looked at it, put it in my pocket.

BARKER: Do you recall, was there any blood on the bullet, or was it--how did the bullet look?

TOMLINSON: Well, it was copper colored bullet and I couldn't tell whether it had blood on it or not. I--I really didn't look for it.

BARKER: It was a spent shell?

TOMLINSON: Yes.

BARKER: Well, now, as you think back, is there any doubt in your mind today that the stretcher on which you found that bullet was the stretcher that came off of the elevator?

TOMLINSON: Well, I know that. That I know. I just don't know who was on that stretcher.

BARKER: But, the stretcher was on the elevator?

TOMLINSON: Right.

BARKER: And this was the elevator that Governor Connally would have taken, or would have been placed on to go to the operating room, is that right?

TOMLINSON: Yes, sir, that's--that's the one he went up on.
CRONKITE: Critics have claimed that in fact the bullet came from the President's stretcher, which would rule out the single bullet theory. But the President's stretcher was never in that elevator and consequently Mr. Tomlinson's recollection disposes of that particular dispute. It does not dispose of another claim, however, the claim that the bullet was planted on the Governor's stretcher as part of a plot to link Oswald to the assassination. And that claim can never be disproved.

The bullet is almost intact, only slightly flattened, with a little cone of lead missing from the rear end. Could such a bullet have penetrated successively, a human neck, a human torso, a wrist and a thigh, and emerged in this condition? The Commission used animal carcasses and blocks of gelatin to test the bullet's penetrating power, firing repeated shots from Oswald's rifle. Now, this is standard technique. But, because of the difficulty of lining up such a shot, the Commission experts fired their bullets separately through the various simulators. Each time they measured how much speed the bullet had lost from its initial 2,000 feet per second, and in the end, concluded that the bullet would have retained enough velocity to penetrate the Governor's thigh.

But, it seemed to us that the only completely valid test would be a single shot directly through a series of objects with the same thickness and density as the two bodies. We decided to make that shot.

RATHER: Dr. Alfred G. Olivier, Chief of Wound Ballistics at Edgewood Arsenal, who conducted the tests for the Warren Commission, served as consultant to CBS News in these experiments at the H. P. White Ballistics Laboratory. Dr. Olivier suggested using gelatin blocks to simulate human tissue. The main object was to line up targets simulating the President's neck and the Governor's chest, wrist and thigh, spaced as far apart as Mr. Zapruder's film indicated they were in the limousine, and then to see how far a 6.5 Mannlicher-Carcano bullet would penetrate.

Extensive research at Edgewood Arsenal has shown that gelatin, in a 20 percent concentration, gives a good simulation of human tissue. The first gelatin block was made five and a half inches thick to simulate the President's neck, with cloth added to represent his coat and shirt. Set two feet or so away was a 12 inch block representing the Governor's chest, also with appropriate clothing. This high speed sequence, taken at 22,000 frames a second, shows the chest simulation block and how the bullet, slightly unstable after passing through neck simulation, begins to turn off course as it tears through the gelatin, exiting in an attitude pointing down.

The wrist block was two and a half inches thick, inset with masonite to represent bone. Beyond was a fourth gelatin target representing the Governor's thigh. Dr. Olivier told reporter Walter Lister about the tests.
OLIVIER: When the bullet struck the simulated neck, it was perfectly stable, passed through making a small track in the gelatin. This—this very closely simulates the wound received by the President. It was a small entrance and a small exit, as described on the autopsy report.

WALTER LISTER: This is about the way it would look through human muscle tissue?

OLIVIER: Yes. After the bullet left this simulated neck, and passed from this dense medium into air, which is less dense, then it had a chance to start to tip and by the time it struck this block it was tipped, and you can see the difference: a much larger track in the gelatin block, which represents a more serious wound, as the Governor received. In his case, the bullet passed along the rib, fractured the rib, throwing fragments into the lung. Of course, we have no rib here, but it still simulates passing through the flesh.

By the time it had passed through here, it had lost considerable velocity, and entered the simulated wrist. In some cases, it passed through the wrist; in other cases, it lodged in the wrist. Behind this wrist, we had another gelatin block, representing the Governor's thigh. In none of the cases did this thing actually penetrate that, but it would have taken very little more velocity to have caused a similar wound.

LISTER: What do you think that these tests have indicated here?

OLIVIER: Well, that they—I think they very strongly show that this one bullet could have caused all the wounds.

LISTER: Did someone outline these experiments for you?

OLIVIER: No, I'm afraid I'm guilty of the whole business.

CRONKITE: Our tests confirm that a single bullet could indeed have wounded both men. But conceding that it is possible, we must also ask if it is probable. We asked two distinguished pathologists, both experienced in the study of wounds, to give us their best judgment. They are Dr. William F. Enos of Northern Virginia Doctors Hospital, who has studied wounds both as a military and civilian pathologist; and Dr. Cyril Wecht, from whom we heard earlier. First, Dr. Enos with Dan Rather:

ENOS: I have had cases in which the missiles have gone through relatively heavy bone and very little deformity. The fact that it went through two men is perfectly acceptable because of its velocity.

RATHER: Now, most of us have an idea that the minute a bullet hits a bone that it shatters that bullet.
ENOS: No, not necessarily. Again, it depends on the construction of the missile, of the bullet. If it's a full-jacketed bullet it can remain intact with very little or no deformity.

RATHER: Is it impossible that the bullet would have gone through President Kennedy, gone through Governor Connolly and not suffered any more damage than is shown in this photograph?

ENOS: No, without hedging. In medicine we always fall back upon the trite expression; we never like to say that something is impossible. I--I would say that it is highly improbable. I--I--I would hesitate, really, to say that it's absolutely 100 percent impossible, but it is highly improbable. Another one, you see, another one of the very many highly improbables that we are asked to accept by the Warren Commission, if we are to accept the validity of their full Report.

(ANNOUNCEMENT)

ANNOUNCER: This is a CBS NEWS INQUIRY: "The Warren Report." Here again is Walter Cronkite.

CRONKITE: The most persuasive critic of the single bullet theory is the man who might be expected to know best, the victim himself, Texas Governor John Connally. Although he accepts the Warren Report's conclusion, that Oswald did all the shooting, he has never believed that the first bullet could have hit both the President and himself.

CONNALLY: The only way that I could ever reconcile my memory of what happened and what occurred, with respect to the one bullet theory, is that it had to be the second bullet that might have hit us both.

BARKER: Do you believe, Governor Connally, that the first bullet could have missed, the second one hit both of you, and the third one hit President Kennedy?

CONNALLY: That's possible. That's possible. Now, the best witness I know doesn't believe that.

BARKER: Who is the best witness you know?

CONNALLY: Nellie was there, and she saw it. She believes the first bullet hit him, because she saw him after he was hit. She thinks the second bullet hit me, and the third bullet hit him.

MRS. CONNALLY: The first sound, the first shot, I heard, and turned and looked right into the President's face. He was clutching his throat, and just slumped down. He just had a--a look of nothingness on his face. He--he didn't say anything. But that was the first shot.
The second shot, that hit John -- well, of course, I could see him covered with -- with blood, and his -- his reaction to a second shot. The third shot, even though I didn't see the President, I felt the matter all over me, and I could see it all over the car.

So I'll just have to say that I think there were three shots, and that I had a reaction to three shots. And -- that's just what I believe.

CONNALLY: Beyond any question, and I'll never change my opinion; the first bullet did not hit me. The second bullet did hit me. The third bullet did not hit me.

Now, so far as I'm concerned, all I can say with any finality is that if there is -- if the single bullet theory is correct, then it had to be the second bullet that hit President Kennedy and me.

CRONKITE: The Governor insists that he heard a shot before he was struck, and that therefore he could not have been struck by the first bullet, as the Warren Commission supposes.

Those of you who were with us last night remember that we cited indications in the Zapruder film that it was Oswald's first shot, fired earlier than the Commission believed, which missed. Now if that is so, then the Governor could indeed have heard a shot and begun reacting to it before he himself was hit. We have, in fact, three theories to explain the same facts -- the single bullet theory, the second assassin theory, the theory that all three bullets that were fired found their targets.

Our own view, on the evidence, is that it is difficult to believe the single bullet theory. But, to believe the other theories is even more difficult. If the Governor's wounds were caused by a separate bullet, then we must believe that a bullet passed through the President's neck, emerged at high velocity on a course that was taking it directly into the middle of the automobile, and then vanished without a trace.

Or, we can complicate matters even further, as some do, by adding a second assassin, who fires almost simultaneously with Oswald, and whose bullet travels miraculously a trajectory identical with Oswald's, and that second assassin, too, vanishes without a trace. Difficult to believe as the single bullet theory may be, it seems to be the least difficult of all those that are available. In the end, like the Commission, we are persuaded that a single bullet wounded both President Kennedy and Governor Connally.

The Warren Report's contention that there was only one assassin rests on the conviction that all the wounds suffered by both men were inflicted by no more than three shots, fired from behind and above them. We have heard Captain Humes, as well as other doctors and experts. We have looked hard at the single bullet theory. The case is a strong one.
There is not a single item of hard evidence for a second assassin. No wound that can be attributed to him. No one who saw him, although he would have been firing in full view of a crowded plaza. No bullets. No cartridge cases. Nothing tangible.

If the demands for certainty that are made upon the Commission were applied to its critics, the theory of a second assassin would vanish before it was spoken.

As for the Governor, he now concedes he might have been struck by the bullet that pierced the President's throat. And our own investigation makes it likely that the bullet was the second, and not the first, that Oswald fired. The Governor's objections, which were the most troubling of all, now disappear. CBS NEWS concludes, therefore, that Oswald was the sole assassin.

But was he truly alone? Or were there others in dark shadows behind him, co-authors of a plot in which Oswald was cast as a triggerman? Tomorrow we will look into those charges, and concern ourselves with Officer Tippit, with Jack Ruby, and the murky accounts and strange personages introduced into the case by District Attorney Jim Garrison in New Orleans.

GARRISON: He did not touch a gun on that day. He was a decoy at first, and then he was a patsy, and then he was a victim.

CRONKITE: We will hear Garrison, and some of those whom he has involved. And we will try to answer the third of our major questions: Was Lee Harvey Oswald part of a conspiracy?

This is Walter Cronkite. Good night.

ANNOUNCER: This has been the second of a series, a CBS NEWS INQUIRY: "The Warren Report." The third part will appear tomorrow night at this same time.

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