## Hr. Kent Carroll

Carroll \& Graf
260 Fiftn Avenue
New York, NI 10001

## Dear Mr. Carroll,

In recent days I've received accounts of what you are about to publishing the book the title ahone of which is damaging to a number of people your author, ${ }_{\text {Harry }}$ Livingstone, imagines have conspired against him and worse. In your own words, quoted in ${ }^{7}$ ublishers Weekly, we are allegedly "furthering the conspiracy" to kill the President. You personally then charge me with at the least being an accessory after the fact of that terrible crime. I did not know whether this is real or puffery but the accounts I've gotten, admittedly hearsay, of what the book says along with still new threats by your author that were sent me and I received yesterday have ne deeply concerned.'

With the clear threat in the published interview I got only yesterday I have to be coneerned about being killed. Iliss words, along with the other spuriđus and Iasure you I believe malicious allegations of assassination involvement, are " will pay for it." I am aware that this can be ambiguous but my knowledge of your author leads me to belive that he continues to be the manace I believe he had become more than a half-year ago. This involves the state of my health, not that I think he will kill me. BuF then there is also his clear irrationality I believe cannot be entirely unknown to you, so who can tell.

Yesterday, sitting and reading a hardback commercialization and exploitation of the assassination, the book merely slipped. In that simple act that others would not even botice the slin on my forearm peeled back. Ny skin alone is so friable that from my acci, ental rubbing my nose in my sleep it peeld pack on my right forearm an tanch in one direction and two inchesk inthe bther dorection. Merelygrazing against the found doorknob war with the other forearm as I walked out of my small office, and I can walk only slowly, I did the same thing to it. In all in recent weeks I have had as many as eight complete or halves of $3 \times 3$ sutgical compresses on both arms to cover recient such injuries or those that had clotted, the latter for mechanical protection. I have my blood tested thrice weekly so the clotting time can be monitored carefully because of the inhorent danger of the medication that keeps me alive and causes the skin condition I refer to. The adhesive tape that holds the patch on aft for the needle is removed causes subcutaneous hemorrhaging. The merest contact with anything also does, as anyone who has seen me in recent years can tell you.

स्side from other quite serious medical conditions what $I$ tell you above means that the merest push can kill me. And I know your author to be capable of violence.

I do not know whether when you decided to publisty what you cannot have submitted to any competent peer review, not asked me anything at all about, you considered what those of us you clearly indicate you know are going to be severely damaged by your

1968 PANEL. IFW IEW OF TIOTOCRAPIS, X-RAY FILAS, DOCUNENTS AND OTHER EVIDEHCE PERTAINIHG TO THE FATAL NOUNDING OF IRESIDENT JOHA F. KENREDY CA NOVEMBER 22, 1963 IN DALLAS, TEXAS

At the request of The Honorable Ransey Clark, Attorney
Geveral of the United States, four physicians (hereafter sometimes referred to as the Panel) met in Whshington, D, C, on February 26 and 27 to examine varlous photographs, X-ray films, documents and other evidence pertaining to the death of President Kennedy, and to evalunte recorded in the Autopsy Report on the body of President Kennedy signed by Commnder J. J. Humes, Medical Corps, United States Navy, Commander J. Thornton Bonwsil, Medical Corps, United States Navy and Lieutenant Colonel Pierre A.'Finck, Medical Corps, United Statea Army and in the Supplamental Report signed by Comilander Humes, These appear In the Warren Comaission Report at pngeg 538 to 545.

The four physiciana constituting The Panel were:
(1) Carnes, William \#., M.D., Professor of Pathology, University of Utah, Salt Lake City, Utah, Member of Medical Examiner's Commiasion, State of Utah, nominated by Dr. J. E., Wallace Sterling, Presidfnt of Stanford University,
(2) Fisher, Russell S., M.D., Professor of Forensie Pathology, University oi Maryland, and Chief Medical Examiner of the State of Maryland, Baltimore, Maryland, nominated by Dr. Osear B, Ilunter, Jr, President of tht College of American Pa;hologists.
(3) Morga
of Me
of Hy
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(4) Moril

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nominated by $t$ therenfter req. to The Panel w: exhibits and co report.

No one of prior Investig acted with com views as to th. the 1963 Autop

The Autop entire body of

[^0]Neck Region Films $\# 8,9$ and 10 sllowed visualisation of the lower neck. Subcutaneous emphysema is present just, to the right of the cervical spine immediately above the apex of the right lung. Also several small metallic fragments are present in this region. There is no evidence of fracture of either scapula or of the clavicles, or of the ribs or of any of the cervical and characic vertebrac.

The foregoing observations indicate that: the pathway of the projectile Involving the neck was confined to a region to the right of the spine and superior to a plane passing through the upper margin of the right scapula, the apex of the right lung, and the right clavicle. Any other pathway would have almost certainiy fractured one or more bones of the right shoulder girdle and thorax.

Other Regions Studied: No bullets or fragments of bullets are demonstrated in X-rayed portions of the body other than those described above. On film $\$ 13$, a small round opaque structure, a Iittle more than 1 mm . In diameter, is visible just to the right of the midilne at the level of the first sacral segment of the spine. Its smooth characteristics aqe not similar to those of the projectile fragments seen in the X-rays of the skull and neck.

## Examination of the Clothing

Suic Coat (CE 393) A ragged oval hole about 15 mim. long (verticaliy) is located 5 cm . to the right of the midifne in the back of the coat at a point about 12 cm , below the upper edge of the coat collar. A smaller ragged hole which is located near the midline and about 4 cm , below the upper edge of the collar does not overlie any corresponding damage to the shirt or skin and appears to be unrelated to the wounds or their causation.
號 In describing the integrity of the autoysy doctors' teatimony. Humes had suorn iarren keport and the integrity of en eck visiule on the x-rays (2H361). 399 is there sere no metalud, yet it had to have csused the neck wounds for the Comudssion's ulearly uifrativentad, the panel's statecient that "several shall wetallic rocments cuse to survive. Thus, that panel sthough laciing the detail and preoision that might ard prosent" in the necis resion, althoush acick to prove that the Report and the autopbe expected from such eminences, is suricentibly wrong. sy findings on which it was based are irreversibly wrong.

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anteriorly and superiorly，None can be visualized on the left side of the brain and none below a horizontal plane through the floor of the anterior fossa of the skull．

On one of the lateral films of the skull（有2），a hole measuring approximately 8 mm ，in diameter on the outer surface of the skull and as much as 20 mm ，on the internal surface can be seen in profile approximately 100 mm ，above the external occipital protuberance．The bone of the lower edge of the hole is depressed． Also there is，embedded in the outer table of the skull close to the lower edge of the hole，a large metallic fragment which on the antero－posterior film（俳）lies 25 mm ，to the right of the midline． This fragment as seen in the latter，film is round and measures 6.5 mm ．in diameter．Immediately adjacent to the hole on the internal surface of the skull，there is localized elevation of the soft tissues．Small fragments of bone lie within portions of these tissues and within the hole itself．These changes are consistent with an entrance wound of the skull produced by a bullet similar to that of exhibit CE 399.

The metallic fragments visualized within the right cerebral hemisphere fall into two groups．One group consists of relatively large fragments，more ox less randomly distributed．The second group consists of finely divided fragments，distributed in a postero－anterior direction in a region 45 mm ，long and 8 mm ．wide． As seen on lateral film \｜2 this formation overlies the position of the coronal suture；its long axis if＇extended posteriorly passes through the above－mentioned hole．It appears to end anteriorly immediately below the badly fragmented frontal and parietal bones Just anterfor to the region of the coronal suture．

[^2]The foregoing obse was struck from behind occipital region 25 mm． above the external ocei fragmented on entering of fine metallic debri： explosively fracture tl emerged from the head．

In addition to th no evidence of project or in the right cerebr passing through the f1 Also，although the fra of the midline and int skull，no bony defect entering or leaving th of the midline or in $t$ reasonable to postulat in a direction other
of further note， presented to The Pane regions by what appea on film 作2，a pair of the film．Neither of interpretation of the

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[^0]:    This is the 1968 panel report relaased by Ramsey Clark in January 1969 to head off in Cerre Jin Garrison's efforts to have the pletures and
    of Clay Shaw. See py. $1551 f$. for extensive analysis.

    Clay Shaw. See py. 155ff. for extensive analysis.
    Note the ponel includes amone its res,onsibilities to evaluate the photographic
    Note the panel includes anone its resyonsibilities to evaluate the photograp materials in relation to the "medical conciusions" of huras Supgiemental Report. thia This the panel fails to do. The Supplemental kegort is never again mentioned in this panel report.

[^1]:    The pendl does not explal shirt cannot accurately b ct this point, und, as th they sere of sienificant considarably longer than have accurately measured

[^2]:    Here we learn that the entrence wound in the head，never measured by the autopsy doctors who preferred to loeate it merely as＂slightly above＂the occipital protuberance，was actually 100 mm ．above that point．No silly millimeter here．That is 4 inches higher than the autopsy doctors made out，putting the wound high on the back of the President＇s head instead of near the hairline as the doctors swore to and depicted on drawings， This is hou the panel＂supported＂the autopsy report．

[^3]:    The panel＇s non sequitur must hove wounded the he？d frc left side of the head could be such as a frangible bullet sti impact．

    Note also the report of was also ssentioned by Humes at a description of precisely wh no way of knowing whether thi： evidence．

