

1 wound of the President's neck.

2 THE COURT:

3 He said he didn't dissect anything.

4 THE WITNESS:

5 I made some measurements of, of course  
6 to determine the wound, this was  
7 the wound of entry in the back of  
8 the neck and I examined both edges  
9 of the surgeon's surgical incision  
10 in the front of the neck. I don't  
11 remember a dissection of this area.  
12 I remember a very close gross ex-  
13 amination.

14 BY MR. OSER:

15 Q Colonel, I believe you testified before that  
16 normally in gunshot wounds, correct me if  
17 I am wrong, that when a gunshot wound  
18 enters an area of the body it leaves a  
19 relatively small hole. What happens to  
20 that wound when it exits in regard to the  
21 size in comparison to the entry wound?

22 A There is a variation from one case to the other.  
23 The wound of exit may be small. It may be  
24 smaller than the wound of entry. It may  
25 be larger than the wound of entry. This,

of course, depends on various factors.

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2 Q I believe you also testified you have done  
3 some work with firing of rifles at the  
4 Arsenal and so forth?

5 A Yes.

6 Q What is the usual thing that you find in com-  
7 paring sizes of entry wounds as to an exit  
8 wound?

9 A Again, there is a variation from one case to  
10 the other. The exit is often larger than  
11 the entry but this is not always the case.

12 Q Now, Colonel, using State Exhibit 68, the dia-  
13 gram of the wound showing on the Autopsy  
14 Descriptive Sheet in the back area it has  
15 a description of seven by four millimeters.  
16 Can you tell me whether or not that is a  
17 correct measurement of the entrance wound  
18 into the back area of the President?

19 A As I remember I took those measurements and  
20 they were from one edge of the wound in  
21 one diameter and from one edge of the  
22 wound to the other in another diameter.  
23 At this time I would like to say there is  
24 some variation in taking measurements of a  
25 wound because you may take into account the

1 edge itself or the abrasion, the rubbing  
2 around the edge of the wound, and that may  
3 explain some differences in taking measure-  
4 ments.

5 Q Can you give me, Colonel, the approximate size  
6 in inches or parts of inches that seven by  
7 four millimeters would be?

8 A Seven millimeters is approximately one-quarter  
9 of an inch. These are approximate things.

10 Q And what is your answer, Colonel, about one-  
11 quarter of an inch, you say?

12 A I have to consult notes because it requires  
13 conversion from metric units to inch units.  
14 This is close enough to say that seven  
15 millimeters is approximately one-quarter  
16 of an inch.

17 Q Colonel, I show you State Exhibit 66 and ask  
18 you whether or not a bullet, or the pellet  
19 contained in that particular cartridge,  
20 could have caused the hole as you have  
21 described?

22 A Yes, if this is a --

23 Q I am merely asking you, Colonel, from looking  
24 at that particular pellet whether or not  
25 that could have caused the hole such as

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you described?

A This is compatible with it.

Q Colonel, can you give me the measurements of the wound in the area of the front of the President's neck that I am pointing to here on State Exhibit 69?

A As I recall, it was given by the Dallas surgeons as approximately five millimeters in diameter.

Q Can you convert approximately five millimeters in diameter to a part of an inch for me, please?

A Approximately three-sixteenths of one inch corresponds to five millimeters.

Q Referring, Colonel, to your Summary Report, State-67 for purposes of identification, which you signed on 26 January, 1967, can you tell me why you did not list the size of the wound that you say is the exit wound in the throat of the President?

A Because I did not, I did not see that wound in the front. I did not, I don't know why it is not there.

Q You say you did not see it?

A I did not see the wound of exit in the skin. I saw a hole of exit in the shirt of the

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President.

Q But in speaking of the throat area, or skin area of the President, relative to his throat you said it was approximately five millimeters and you later said that Commander Humes received this information from Dallas.

A The wound that was in the front of the neck I obtained that information from Dr. Humes.

NO HIATUS HERE.

1 Q Therefore would you say, Colonel, that the  
2 wound in the back of the neck as you  
3 describe it is larger than the wound in  
4 the throat area?

5 MR. DYMOND:

6 We object to this. First of all, the  
7 Doctor testified that these are  
8 approximate measurements on wounds  
9 in the skin. Secondly, the doctor  
10 testified that he never saw the front  
11 bullet wound and consequently an  
12 answer on that would have to be based  
13 on measurements made by someone else,  
14 told to someone else, and then  
15 included in the report.

16 MR. OSER:

17 All the results, if The Court please, from  
18 two autopsy reports signed by this  
19 witness stating that -- I believe he  
20 said everything in here is true and  
21 correct when I asked him, then I  
22 asked him if he wished to change  
23 anything in here at the beginning of  
24 his testimony and he said no.. I'm  
25 trying to ascertain what he told

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Defense Counsel on direct examination,  
he stated this was an exit wound and  
I am trying to find out whether the  
hole in the back is larger than the  
front and whether or not it is com-  
patible with a wound from this type  
of bullet.

MR. DYMOND:

If The Court please, the Doctor testified  
what he based his conclusions on and  
further testified that he never did  
see the front wound in the neck and  
consequently the question is impos-  
sible of answer.

THE COURT:

He has testified he is familiar with the  
information received from Dr. Humes  
from the surgeons in Dallas, Texas  
and he knows it was in the report and  
that the information was communicated  
to him and he was aware of it. I  
understand that Mr. Oser's question  
is whether the entrance wound from  
the rear was larger than the exit  
wound, which was the information

1 given by the surgeon in Dallas,  
2 Texas.

3 MR. DYMOND:

4 Your Honor has consistently ruled through-  
5 out the trial that a witness cannot  
6 relate what someone else related to  
7 him.

8 THE COURT:

9 Ordinarily I agree but it was advised to  
10 him and he was made cognizant of it  
11 when he signed the original report,  
12 when he signed the report he either  
13 knew that as a fact which was received  
14 it from Commander Humes who received  
15 it from Dallas. I will permit the  
16 question.

17 You are asking Dr. Finck if from  
18 the information he had whether or not  
19 the measurements of the alleged  
20 entrance wound as you wish to call  
21 it, alleged, is not larger than the  
22 information received from Dallas of  
23 the entrance wound in the front. I  
24 will permit you to ask it.

25 MR. DYMOND:



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To which Counsel respectfully objects and reserves a Bill of Exception on the grounds this is hearsay evidence making the entire line of questioning, particularly this question, the answer to the question, the objection and ruling of the Court and the entire record parts of the bill.

MR. OSER:

Could I have the witness answer my question. Will you answer the question.

THE WITNESS:

Please repeat the question.

THE REPORTER:

Question: "Therefore, would you say, Colonel, that the wound in the back of the neck as you described it is larger than the wound in the throat area?"

MR. DYMOND:

Your Honor, that is not the question you stated you were ruling on. You said you were ruling on the question whether it was larger than the information indicated.

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MR. OSER:

I will ask that question.

THE WITNESS:

Whether or not it was larger?

BY MR. OSER:

Q Than the information you received from the  
doctors in Dallas.

MR. DYMOND:

Object now on the ground that he didn't  
receive the information from the  
Doctor.

THE COURT:

I just ruled that he signed his name to  
the report and under that exception  
I will permit the question. Do you  
understand the question?

MR. OSER:

Let me ask you again, Doctor --

THE COURT:

No, because then I will have to be ruling  
on different things if you change the  
question each time.

MR. OSER:

Then I'll ask that the Court Reporter  
read the question I asked.

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THE REPORTER:

Question: "Therefore, would you say, Colonel, that the wound in the back of the neck as you described it is larger than the wound in the throat area" -- then he added the second part of the question, Your Honor, which says, "than the information you received from the doctors in Dallas?"

THE WITNESS:

I don't know 'cause I measured the wound of entry whereas I had no way of measuring the wound of exit and the wound could have been slightly smaller, the same size, or slightly larger because all I have is somebody saying it was approximately 5 millimeters in diameter.

NO HIATUS HERE

1 THE COURT:

2 We have covered it well and you can go  
3 on to something else now, Mr. Oser.

4 BY MR. OSER:

5 Q You said the back wound was seven by four  
6 millimeters, Doctor?

7 A Approximately, all these measurements are  
8 approximately.

9 Q Why approximate, Colonel?

10 A Because the edge of the wound can be measured  
11 in different ways. The edge of the wound  
12 is something that you measure with a ruler  
13 and you take approximate measurements and  
14 you write them down.

15 Q Now in speaking about the head wound in  
16 State Exhibit 70, I believe you testified  
17 on direct examination that you found a  
18 wound in the back of the head approximately  
19 one inch to the right and slightly above  
20 the exterior occipital protuberance, is  
21 that right?

22 A Yes.

23 Q Does State 70 show the correct location of this  
24 measurement?

25 A The profile of the head showing the wound in the

1 back of the head and exit on the right  
2 side?

3 Q I am only now speaking of the wound marked "in,"  
4 does that correctly indicate, where the  
5 word "in" is on the back of the head where  
6 the wound was.

7 A Again these drawings are approximate and the  
8 measurements are in relation to a bony  
9 prominence and from what I recall the  
10 wound was higher than the bony prominence,  
11 the external occipital protuberance, the  
12 wound was slightly higher in relation to  
13 a transversal line running through this  
14 prominent occipital protuberance.

15 Q Am I correct in saying that State Exhibit 70,  
16 the diagram, is not entirely correct in  
17 stating the letters "in"?

18 A It is a diagram showing --

19 MR. OSER:

20 I ask that the witness answer yes or no  
21 and then you can explain.

22 THE COURT:

23 You should answer.

24 BY MR. OSER:

25 Q Am I correct in saying -- I ask that the Re-

1           porter read it back.

2                   (Whereupon, the question was read  
3                   back by the Reporter.)

4   A    Having seen the photographs I think that the  
5           wound was higher and therefore there is a  
6           difference between the drawing and the  
7           photograph.

8   BY MR. OSER:

9   Q    Then the answer to my question is the photograph  
10           as it is drawn in State Exhibit 70 is not  
11           correct, is that correct?

12   A    I would not say this drawing is incorrect.

13   Q    Colonel, let me ask you: Is this hole right  
14           here where I am pointing to in the correct  
15           position as you saw it, right now on that  
16           diagram?

17   A    We are looking at things only on one plane.

18   Q    Yes or no, and then you can explain your answer.

19   A    I can't compare this with the examination done  
20           from the back looking in the back of the  
21           head. We are looking at the side of the  
22           head here with the wound visible in the  
23           back, but we are not facing the back of  
24           the head.

25   Q    Colonel, didn't you previously testify that that

1           S           exhibit was acquired to help you in the  
2                           autopsy?

3       A       Yes, it did. It was the only thing available  
4                           to us, and for practical purposes this  
5                           drawing, this drawing is adequate to show  
6                           the approximate location of the wound in  
7                           the head of the President.

8       Q       It only shows approximately and doesn't show  
9                           exactly, is that correct?

10      A       It can't show it exactly. It is not a photo-  
11                           graph. The word exactly is excessive.

12           MR. OSER:

13                   I think the question calls for a yes or  
14                           no answer, and then he can explain,  
15                           Your Honor.

16           MR. DYMOND:

17                   I submit the question is one that requires  
18                           judgment of depth in a two-dimension  
19                           sketch. There is nothing at all on  
20                           this sketch which would permit a person  
21                           to give an estimate of depth. That is  
22                           the difference between the location of  
23                           something laterally and from the back  
24                           between this and an actual photograph.

25           THE COURT:

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If I may suggest that Mr. Dymond use himself for the witness to demonstrate on, for Dr. Finck to give the exact location of entrance and why don't you do it on you, Mr. Oser, and get it over with.

MR. OSER:

Your Honor, I think the State has a right to ascertain just how accurate these two exhibits were that were used by the Doctor in his testimony and this is what I am trying to do.

THE COURT:

You may proceed.

BY MR. OSER:

Q Doctor, --

THE COURT:

I am going to rule Mr. Dymond is correct. Rephrase the question. It does not show the three dimensions, but you can bring that out in the questioning if you care to do so.

NO HIATUS HERE.



1 BY MR.OSER:

2 Q Colonel, did you use those two exhibits in your  
3 testimony in front of the Warren Commis-  
4 sion?

5 A As I recall I used those exhibits in my  
6 testimony.

7 Q Did you use the descriptive sheet of the  
8 autopsy in your testimony before the Warren  
9 Commission?

10 A I don't remember using it.

11 Q Can you tell me, Colonel, whether or not on  
12 the Exhibit State-70, the area I am now  
13 pointing to which I believe is indicated  
14 by the letter "A," whether the location  
15 on this exhibit is in the same location as  
16 indicated in the head area as depicted in  
17 the autopsy descriptive sheet?

18 A Approximately, it is in the back of the head,  
19 approximately.

20 Q Approximately. All right. Now, referring to  
21 the same exhibit now pointing to an area  
22 in the neck of the sketch depicted on  
23 State-70, and I ask you whether or not  
24 the point I'm not pointing to is supposed  
25 to represent a bullet wound hole in this

- 1                    particular picture?
- 2     A            This represents a bullet wound in the back of  
3                    the neck.
- 4     Q            I ask you whether or not the location where this  
5                    particular wound is indicated on this  
6                    exhibit is in the same position as ex-  
7                    hibited on the autopsy descriptive report  
8                    prepared in the morgue or on the autopsy  
9                    table?
- 10    A            Approximately, yes. I would like to say that  
11                    the wound on this exhibit -- What is the  
12                    number of this one?
- 13    Q            -68.
- 14    A            The position of the wound of entry in Exhibit  
15                    68 was higher than shown on Exhibit 68.
- 16    Q            Colonel, will you please step down from the  
17                    witness stand and indicate on State  
18                    Exhibit 68, the right-hand figure drawn  
19                    there, would you please with this pen mark  
20                    the area on that exhibit the hole as it  
21                    is depicted in State Exhibit 69 and -70?
- 22    A            I don't have here on this exhibit the acromion  
23                    on the shoulder but what I can do is show  
24                    an approximate location higher.
- 25    Q            Do you have the acromion shown in State Exhibit

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70 -- Describe the acromion.

A The acromion is the bony prominence in the shoulder and I can't pinpoint this on this exhibit.

Q Well, then, from what you recall having seen, would you mark it on there?

A Approximately?

Q Yes.

A I would say that the wound was higher.

Q Now, Colonel, would you put your initials by that little mark and then you can resume your seat. Now, Colonel --

A Mr. Oser, may I?

Q Certainly.

A Expand on this?

Q Certainly.

A On page 2 of Exhibit S-67, the paragraph entitled "The Neck Wound," "The Location," that is what you are referring to?

Q I know what I am referring to, Colonel.

A States the drawing itself may be somewhat misleading as to the location making it appear at a point lower than it actually was.

Q Colonel, if the photographs were misleading



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THE WITNESS:

I could not use photographs in my  
testimony.

NO HIATUS HERE

1 BY MR. OSER:

2 Q That wasn't my question, Colonel. My question  
3 was: "If the exhibit or the drawing  
4 State 70, which I am pointing to right  
5 now, in your summary report says is mis-  
6 leading, why did you use this exhibit in  
7 testifying with it and about it in front  
8 of the Warren Commission and here in  
9 Court today?"

10 MR. DYMOND:

11 If the Court please, I object again, be-  
12 cause that is not the exhibit which  
13 the Doctor said is misleading in this  
14 report. Unless I am incorrect, the  
15 exhibit he states was misleading was  
16 State 68.

17 THE COURT:

18 Let's ask the Doctor which exhibit did  
19 you refer to as being misleading?

20 THE WITNESS:

21 Let me refer again to that Page 2 of  
22 State-67.

23 Photographs No. 11, 12, 38 and 39 verify  
24 the location of the wound as stated  
25 in the report. Warren Commission

1 Exhibit 397 includes a drawing which  
2 purports to show the approximate lo-  
3 cation of the wound and specifically  
4 notes it was five and a half inches  
5 from the tip of the mastoid process  
6 behind the right ear and the same  
7 thing 14 centimeters from the tip of  
8 the right acromion.

9 Photograph 12, 11, 38 and 39 concern the  
10 accuracy of the measurements. The  
11 drawing itself may be somewhat mis-  
12 leading as to the location of the  
13 wound. Now if I would know what that  
14 refers to because no one photograph  
15 shows the wound of the back of the  
16 neck and the wound of the throat.

17 Photographs 26 and 38 show the wound in  
18 the back of the neck higher from the  
19 horizontal plane than the wound in  
20 the throat. What is Exhibit 397? Is  
21 this Exhibit 397 of the Warren Report,  
22 is State-67?

23 BY MR. OSER:

24 Q 397, Colonel, is the handwritten --

25 A It includes a drawing in Volume 17, Page 45.

1 Q Yes, that is part of Exhibit 397, along with  
2 the written notes of Dr. Humes.

3 A May I see it?

4 Q Yes. Now, Colonel --

5 A Let me answer your question now.

6 THE COURT:

7 He wants to answer your question.

8 THE WITNESS:

9 So, Exhibit, Commission Exhibit 397 in-  
10 cluding the drawing which you just  
11 showed to me in Volume 17, Page 45  
12 is the drawing to which this discrepan-  
13 cy refers on Page 2 of State-67.

14 BY MR. OSER:

15 Q Can you tell me, Colonel, when you found out  
16 about this discrepancy in that drawing,  
17 the discrepancy you have so marked on this  
18 exhibit?

19 A At the time I was comparing this Exhibit 397,  
20 Volume 17, Page 45, with the photographs  
21 of the autopsy which I saw for the first  
22 time in January, 1967.

23 Q So then am I correct in stating, Colonel, that  
24 approximately in January, 1967 you dis-  
25 covered the discrepancies in this particu-



1           2.           lar autopsy descriptive sheet, is that  
2                           correct?

3   A       We stated so in that statement issued on the  
4           26th of January, 1967 and I can say that  
5           you can expect differences between schematic  
6           drawings which are made ahead of time and  
7           used as a work sheet and photographs.

8   Q       Colonel, what do you mean by drawings made  
9           ahead of time, are you telling me the  
10          descriptive sheet was drawn before the  
11          autopsy of the president?

12   A       Not the wounds but the contour of the body to  
13          mark the location, the autopsy work sheet.  
14          Many pathologists use these to record  
15          their findings, work sheets that may show  
16          the front and back, the head and other  
17          things.

18   Q       Well, when was this writing put in here that I  
19          am now pointing to, was that put on at the  
20          time of the autopsy or before?

21   A       Oh, definitely around the time of examination.  
22          From my recollection this was made between  
23          the two other prosecutors and I participated  
24          in this by making some measurements which  
25          I recognize here.

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Q Now, Colonel, I again, speaking about State  
Exhibit 70 and the hole I am now pointing  
to designated as "A" on this exhibit, can  
you tell me whether or not there were  
any other characteristics that you found  
other than the bevelling or coning effect  
that led you to believe or state that this  
was an entrance wound?

NO HIATUS HERE.

1 A No, and I would like to explain that the  
2 beveling in bone is among the best factors  
3 to use in determining the direction of the  
4 bullet. Having seen beveling from inside  
5 in that wound in the back of the head in  
6 the bone I made a positive identification  
7 of a wound of entrance in the back of the  
8 head. This is firm.

9 Q Colonel, did you dissect the scalp area and  
10 submit a section to microscopic examina-  
11 tion?

12 A Again, I examined that wound.

13 Q Yes or no and then you can explain.

14 A I don't remember. I don't remember. The  
15 microscopic examination is not made at the  
16 time of the gross autopsy it is made some-  
17 time later from samples taken at the  
18 autopsy and I don't remember the details  
19 in that respect.

20 Q You don't recall having seen the results of  
21 any such tests?

22 A I remember reading microscopic descriptions  
23 by Dr. Humes and I believe it is in his  
24 supplemental autopsy report describing the  
25 microscopic sections taken from samples.

1 Q Does it appear in your official autopsy report  
2 signed by you in November 1963?

3 A I don't see a microscopic description in the  
4 autopsy report of 1963 from page 978  
5 through 983 of the Volume XVI.

6 Q As of this date, Colonel, in February 1969 can  
7 you tell us the results of any microscopic  
8 examinations of a cross-section of the  
9 wound in the scalp of the President of the  
10 United States?

11 A I have no further information beyond the  
12 description I read made by Dr. Humes.

13 Q Have you ever been to Dallas, Texas, more  
14 particularly Dealey Plaza to see the site  
15 of the assassination?

16 A I have not.

17 Q The description on State Exhibit 68 of the head  
18 wound indicated here says, correct me if I  
19 am wrong "Ragged 15 x 6 millimeters." Is  
20 that correct as you found them?

21 A For practical purposes to show the approximate  
22 -- yes, for practical purpose ragged means  
23 the edges were irregular and I testified  
24 this morning that when a bullet strikes  
25 soft tissue with underlying bone close to

1 it that bone offers a great resistance  
2 and the appearance of the edge of the  
3 wound, and I have seen this repeatedly  
4 in many cases, the appearances of the  
5 edge of the wound is different than when  
6 there is bone close to the skin or when  
7 there was a soft tissue beneath the skin,  
8 and that explains the differences of the  
9 characteristics of those two wounds.

10 One, the wound in the neck, no imme-  
11 diate underlying bone and with very  
12 irregular edges and the other in the back  
13 of the head with the skull under the scalp  
14 and offering immediate resistance to the  
15 projectile.

16 Q Colonel, can you give me the angle of entrance  
17 of this particular wound on a horizontal  
18 plane downward?

19 A The angle of -- of the wound in the head?

20 Q Yes, sir.

21 A In the head. Again, this is difficult to  
22 determine because the wound of exit is  
23 very large and the best we could do is to  
24 take the approximate center of this very  
25 irregular wound and draw a line between

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\* this approximate center and the smaller  
wound of entry in the back of the head  
and draw a general direction. The --

Q What was the angle you calculated, if you  
calculated one?

A Again I have that figure "within 45 degrees,"  
an approximate measure, but the degree of  
45 degrees I remember is better to quote  
for the neck wound than for the head wound  
for the reasons I mentioned. The head  
wound was so large, the exit, it is  
difficult, extremely difficult to give  
an angle for this.

Q Colonel, could you tell me, using myself as  
an example, approximately what the loca-  
tion in my head would be 100 millimeters  
above my external occipital protuberance?

A 100 millimeters is approximately 4 inches.  
This is the external occipital protuberance.  
My finger is approximately 4 inches and  
at a place here which is approximately  
the location here.

Q About right here, Colonel, 'cause I can't  
see you.

A Approximately here, Mr. Oser.

1 Q Now, Colonel, I believe you said that you are  
2 familiar with the report of Drs. Carnes,  
3 Fisher, Morgan, and Moritz, as having  
4 reviewed and returned in 1968, I ask you  
5 whether or not you disagree with their  
6 findings, Colonel, that after viewing the  
7 X-rays of the President they found a hole  
8 in the President's head 100 millimeters  
9 above the occipital protuberance?

10 A I can't say I agree or disagree with this for  
11 the following reasons: This measurement  
12 refers to X-ray films. On Page 11 of this  
13 Panel Review -- what is the exhibit number  
14 of this?

15 Q I now mark it as State-73 -- 72, I am sorry.

16 A On Page 11 of this Panel Review of 1968, which  
17 I read for the first time in 1969, I read:  
18 "One of the lateral films of the skull" -- and  
19 this refers to a general section heading  
20 you will find on "Examination of X-ray  
21 Films" on Page 9, as I read this, I inter-  
22 pret this statement of Page 11 as a measure-  
23 ment based on X-ray films. So there was a  
24 difference between measurements made on  
25 X-ray films and photographs or photograph

- 1                   and the actual measurements on the  
2                   cadaver.
- 3   Q    Do you disagree with the fact that these  
4                   four doctors are qualified in the field  
5                   of pathology?
- 6   A    They are definitely, three of them, three of  
7                   them are qualified pathologists, and the  
8                   fourth doctor is a radiologist.
- 9   Q    Radiology is in what field of medicine?
- 10   A    Radiology is the study of X-rays for diagnostic  
11                   reasons or for the reasons of treating  
12                   with radiation.
- 13   Q    Would you say, Colonel, that a radiologist is  
14                   the best qualified person in the field of  
15                   medicine to read an X-ray?
- 16   A    Yes.
- 17   Q    Did you find in reading that report any mention  
18                   by these four gentlemen, or these four  
19                   doctors, of any hole in the President's  
20                   head being one inch slightly above the  
21                   occipital protuberance bone?
- 22   A    I do not find the measurement as one inch to  
23                   the right of the external occipital  
24                   protuberance in this State-72.
- 25   Q    Colonel, could you step down, and using State



1 Exhibit 70, show me the approximate  
2 location in correlation to the size of  
3 the diagram, or the illustration, where  
4 100 millimeters would be above the  
5 occipital protuberance bone.

6 A On which one?

7 Q I will repeat my question. Using State Exhibit  
8 70, Colonel, would you show me the approxi-  
9 mate location of 100 millimeters above the  
10 occipital protuberance bone in relation to  
11 the size of this particular illustration  
12 as it appears in this exhibit.

13 MR. DYMOND:

14 If the Court please, this exhibit does not  
15 purport to be a scale exhibit and as  
16 I said before, it is not a three-  
17 dimensional photograph. I doubt if  
18 the Doctor could locate this bone,  
19 and if he could, any estimate of dis-  
20 tance would be useless because it does  
21 not purport to be to scale.

22 MR. OSER:

23 If the Court please, the Doctor used this  
24 exhibit saying this is the approximate  
25 location he found, and I am now asking

1 him the approximate location that  
2 four doctors examining X-rays said  
3 it was 100 millimeters above the  
4 occipital protuberance bone, and I  
5 think he can tell the approximate lo-  
6 cation of that.

7 THE COURT:

8 Mr. Dymond's objection is that it is not  
9 a picture of the rear of the base of  
10 the skull, and for that one reason  
11 Mr. Dymond doesn't see how the witness  
12 could put it any relation with respect  
13 to the rear of the skull and moving  
14 laterally across the skull.

15 MR. DYMOND:

16 He has already done this on Mr. Oser's  
17 head, which is three dimensional.

18 MR. OSER:

19 Still and all he used this exhibit showing  
20 at least a portion of the back of the  
21 skull and a line going over the top  
22 of the skull which would indicate at  
23 least to me the approximate mid-part  
24 of the head, and I fail to see why  
25 the Colonel cannot indicate the

1                   approximate location 100 millimeters  
2                   above the occipital protuberance bone.  
3                   I know it is not drawn to scale, but  
4                   I am only asking him for the approxi-  
5                   mate location.

6                   THE COURT:

7                   Could he not do it better in the figure in  
8                   your autopsy sheet there?

9                   MR. OSER:

10                  But, Your Honor, that may well be, but since  
11                  the Doctor has used this exhibit and  
12                  said this is where he found a hole,  
13                  I think the State has a right also to  
14                  show as a result of the testimony  
15                  where approximately 100 millimeters  
16                  was.

17                  THE COURT:

18                  You understand the question?

19                  THE WITNESS:

20                  Yes, I do, but I can't see how I can be  
21                  asked to place a wound that was mea-  
22                  sured on X-rays, I don't understand  
23                  how I can be asked to put on a illustra-  
24                  tive drawing showing the location of the  
25                  wound as we approximately saw it and

1 not based on measurements on X-rays.

2 Those 100 millimeters --

3 BY MR. OSER:

4 Q Tell me how did the illustrator do it if he  
5 didn't have the X-rays and photographs?

6 A He did not.

7 Q Then how did he do it? ?

8 A Because he was told by Dr. Humes about the  
9 approximate location of that wound in the  
10 back of the head on the right side and  
11 approximately one inch from the external  
12 occipital protuberance and slightly above  
13 it.

14 Q He was told by Commander Humes that?

15 A To my knowledge the illustrator making those  
16 drawings made them according to the data  
17 provided by Dr. Humes.

18 Q Let me ask you this then, Colonel: Am I correct  
19 in stating that you said that the area I  
20 am pointing to right now is the approximate  
21 location where four inches above my  
22 protuberance bone is?

23 A On your head I agree but the measurement of 100  
24 millimeters was made on an X-ray and that  
25 is why I am reluctant to say.

1 Q Made by a radiologist, one was a member of the  
2 American Board of Radiology?

3 A I don't know that. That report is signed by  
4 four people, there were four to sign it.

5 Q Didn't you say one was a radiologist?

6 A To my knowledge.

7 Q And a radiologist deals in X-rays?

8 A A radiologist deals with X-rays and the inter-  
9 pretation of them.

10 MR. OSER:

11 Again I call for the witness to put the  
12 approximate location because there  
13 has been testimony on direct examina-  
14 tion as well as cross-examination, and  
15 because the Defense introduced a  
16 picture of Exhibit 388 in Defense  
17 Exhibit 67 and I think the State has a  
18 right to use this for further witnesses  
19 and further cross-examination of the  
20 Doctor. I call for this location.

21 MR. DYMOND:

22 The Doctor has said that he can't do it.

23 THE COURT:

24 He already testified that the or that there  
25 is somewhat of a difference between

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locations on there and in X-rays and  
I am not going to force him to do it.

MR. OSER:

Then I ask that he mark it on State-68.

THE COURT:

If he can do it.

MR. OSER:

Four inches above the external occipital  
protuberance on the descriptive sheet,  
State-68, and I, this is the Autopsy  
Descriptive Sheet, and I presume you  
have used it before for autopsies and  
I ask that it be so marked there.

THE COURT:

If the Doctor can do it.

THE WITNESS:

I don't think I can put a wound on a  
drawing whereas the distance of that  
wound on an X-ray was given as 100  
millimeters I can't do that on some-  
thing that is different.

MR. OSER:

Your Honor, may I ask the witness --

THE COURT:

Let's see if I can clarify it.

1 Dr. Finck, on the drawing of  
2 the rear of a human being, male, can  
3 you place with some kind of a pen or  
4 what have you the correction, if one  
5 was made, as a result of the four-man  
6 panel, as to what you all originally  
7 determined. If you can do it and if  
8 you can't, you can't do it.

9 MR. DYMOND:

10 If The Court please, may I submit the  
11 Doctor is trying to explain that the  
12 distances --

13 MR. OSER:

14 I don't want Mr. Dymond to testify.

15 MR. DYMOND:

16 This is in support of my objection.

17 THE COURT:

18 I will listen.

19 MR. DYMOND:

20 That the distances on an X-ray measurement  
21 is not compatible at all with the  
22 distances on this drawing and would  
23 be impossible to transpose.

24 THE COURT:

25 I will accept that. Take the witness

stand.

BY MR. OSER:

Q Doctor, you are familiar with an autopsy descriptive sheet, have you seen something similar to this before and have you ever used something like this before in an autopsy?

A It is quite common to use worksheets in autopsies.

Q I ask you again, that wasn't my question, have you used them before?

A I have used worksheets in autopsies.

Q And you are telling The Court that you can't mark 100 millimeters above the occipital protuberance bone on that descriptive sheet that you have used before?

MR. DYMOND:

If The Court please, it is repetitious.

Your Honor has ruled on the question.

THE COURT:

I will let the Doctor answer one more time. The question is -- Please read it, Mr. Reporter.

THE REPORTER:

Question: "And you are telling The Court



1 that you can't mark 100 millimeters  
2 above the occipital protuberance  
3 bone on that descriptive sheet that  
4 you say you have used before?"

5 MR. OSER:

6 What is your answer?

7 THE WITNESS:

8 I could place a wound higher on that  
9 drawing but again I don't understand  
10 why I am asked to do that.

11 MR. OSER:

12 I don't think it is for the witness to  
13 determine that.

14 MR. WEGMANN:

15 Let the witness answer.

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18 NO HIATUS HERE.  
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1 THE COURT:

2 If you say you can place it, I suggest  
3 you leave the witness stand, step  
4 down and go place it.

5 THE WITNESS:

6 That would not be placed on X-rays, that  
7 would be a wound higher and approxi-  
8 mately in this location.

9 MR. OSER:

10 These are approximate and we can cover  
11 the matter.

12 BY MR. OSER:

13 Q Initial that, please. Thank you, Doctor.

14 THE WITNESS:

15 Your Honor, at this time I would like to  
16 make a comment for the record.

17 THE COURT:

18 No, sir, you are not running the show.

19 You either answer the question and  
20 give an explanation and don't comment.

21 MR. DYMOND:

22 May we see whether this comment is in the  
23 form of an explanation of his answer,  
24 Your Honor.

25 THE COURT:

1           \*           Is the statement that you wish to make  
2                           in further explanation of your  
3                           answer to this question?

4           THE WITNESS:

5                       Definitely.

6           THE COURT:

7                       You may do so.

8           THE WITNESS:

9                       The mark I have made --

10          THE COURT:

11                      You can't volunteer information just be-  
12                           cause you wish to tell us about it.  
13                           You can only give us answers to a  
14                           question and then an explanation.  
15                           There is a difference from what you  
16                           want to volunteer and what you want  
17                           to explain. If you want to explain  
18                           you may do it but you can't volunteer  
19                           a comment and that is the legal  
20                           situation of the Court. If this is in  
21                           further explanation, then I will per-  
22                           mit it.

23          THE WITNESS:

24                      The mark I just made on -- what is the  
25                           exhibit number?

1 MR. OSER:

2 68.

3 THE WITNESS:

4 On Exhibit 68 does not correspond to  
5 the wound I have seen at the time  
6 of the autopsy. The wound as seen  
7 at the time of the autopsy was not as  
8 high as that. I did so because re-  
9 peatedly I am asked to show on this  
10 drawing what would the position be of  
11 a wound approximately four inches or  
12 100 millimeters above the external  
13 occipital protuberance, but I don't  
14 endorse the 100 millimeters for this  
15 drawing. Again the measurement was  
16 made on X-rays. I was more or less  
17 forced to put that on this exhibit.

18 MR. OSER:

19 I want the record to reflect the witness  
20 was not forced.

21 THE WITNESS:

22 I was asked to show on this drawing a wound  
23 four inches from the external occipital  
24 protuberance.

25 THE COURT:

1                   Let's go on to another area.

2 BY MR. OSER:

3 Q       How many pieces of skull, Colonel, did you have  
4                   to use at the time of the autopsy being  
5                   turned over to you from some other place?

6 A       As I recall, there were three bone fragments  
7                   and on one of them I saw a definite  
8                   beveling which allowed me to identify  
9                   this portion of a wound of exit as part of  
10                  a wound of exit. The appearances of these  
11                  portions of skull had the same general  
12                  characteristics, as far as the appearance  
13                  of bone, as the lining of the skull of  
14                  President Kennedy and I made a positive  
15                  identity of exit seeing the beveling from  
16                  outside after having oriented this specimen  
17                  as regards the outer and inner surfaces  
18                  of the bony specimen.

19 Q       Doctor, did you section and examine the left  
20                  cerebral hemisphere or the left side of  
21                  the brain of the President?

22 A       I did not.

23 Q       Why?

24 A       The most massive lesions were on the right side  
25                  and the brain was preserved in formalin,

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which was a protective fixative used in pathology, it preserves specimens, and I did not make sections of the left side, to my recollection.

Q Colonel, you testified on direct that in your opinion the bullet entered the President's head from above and behind and there is an arrow indicating the proposed direction on this diagram into the left side of the President's head and you are telling me now that you didn't examine the left side of the brain?

MR. DYMOND:

There is no evidence of that in the record.

MR. OSER:

Then I withdraw the question.

NO HIATUS HERE.

BY MR. OSER:

Q What does the arrow indicate?

A I don't know what the arrow means on this exhibit.

Q Let me ask you this: If an individual, Colonel on a hypothetical question, is shot from above and to his right at some distance over 100 feet by a high speed rifle projectile traveling at approximately 2175 feet per second, carrying an energy load of approximately 1876 foot pounds, and this projectile enters this individual in the back of his head, coming in from the right and above, I ask you whether or not you deem it feasible to examine the left side of the brain area in this particular individual?

A Yes, it would be but again the brain was removed and preserved for further sectioning and as far as the exit is concerned it is the examination of the scalp and bone which shows the lesions of the out wound or the exit wound. The brain is a structure which is different from that and I know the brain contained many

- 1                    fragments.
- 2            Q        How many did the left side of the brain con-
- 3                    tain?
- 4            A        What is your question?
- 5            Q        How many fragments were there in the left side
- 6                    of the brain or did the left side of the
- 7                    brain contain?
- 8            A        I don't remember the locations of these
- 9                    metallic fragments.
- 10          Q        Why?
- 11          A        Right now I don't remember.
- 12          Q        I thought you said, Colonel, you didn't
- 13                    section the brain.
- 14          A        We took X-rays of this brain, far as I remember
- 15                    someone did, to determine the presence of
- 16                    metallic fragments after it was removed,
- 17                    as I can remember, but I don't recall
- 18                    making sections of that brain. I believe
- 19                    Dr. Humes did section that brain.
- 20          Q        As of this date in February, February 24, 1969,
- 21                    can you tell me the results of that
- 22                    sectioning of the left side of the brain?
- 23          A        No.
- 24          Q        Can you tell me what the rectangular structure
- 25                    measuring approximately 13 x 20 millimeters



1           3           as found by the four panelists in the  
2                           brain of the President could be?

3           A           I don't know what it means.

4           Q           How long is 13 x 20 millimeters?

5           A           1 inch is 25 millimeters so 13 millimeters is  
6                           smaller than 1 inch and 20 millimeters is  
7                           almost 1 inch but not quite 1 inch  
8                           because 1 inch is 25 millimeters just  
9                           about.

10          Q           Would it be safe to say it was approximately  
11                           or would be approximately 3/4 x 1/2 inch,  
12                           that'd be about right?

13          A           20 millimeters is approximately 3/4 of 1 inch  
14                           and 13 millimeters is approximately 1/2  
15                           an inch because 25 is one inch.

16          Q           Now, Colonel, can -- You previously testified  
17                           that you did a lot of work at the autopsy  
18                           table in the area of this particular  
19                           head wound. Can you tell me why you  
20                           can't tell me what this 3/4 inch x 1/2  
21                           inch rectangular-shaped whatever it is,  
22                           what it was in the President's brain?

23          A           At this time I can't interpret this. There are  
24                           numerous bone fragments produced by this  
25                           explosive force in the head leading to

1           Q       many bone fragments and I can't positively  
2                    identify this structure you are referring  
3                    to.

4           Q       Did you find any bone fragments this size?

5           A       Where?

6           Q       In the brain.

7           A       I don't recall.

8           Q       Did you mention this 13 x 20 millimeters or  
9                    1/2 inch by 3/4 inch rectangular object  
10                   in the brain of the President in your  
11                   report of January 1967?

12          A       I don't think I did.

13          Q       Did you mention this 3/4 x 1/2 inch object  
14                   in the President's brain in your autopsy  
15                   report of November 24, 1963?

16          A       No, but we would have to refer to the supple-  
17                   mental report which I don't have with me  
18                   involving the brain descriptions by  
19                   Dr. Humes. In the report of November '63  
20                   I don't remember a fragment from the  
21                   brain for the very good reason that as I  
22                   remember on Sunday the 24th of November,  
23                   1963 the brain was still being preserved,  
24                   fixed, as I say in formalin. To the  
25                   best of my recollection it was not