

The Bureau is Always Right; or

Cover the Bureau's Ass; or

How the truth becomes a "False Allegation" to the FBI and in its tickler, in what I think is R.E. Long's writing. He was later an assistant director, fitting in the Gilbert and Sullivan brass-polishing tradition.

There are ~~4~~ references to the "autopsy" that are not references to the *or any* autopsy. The second refers to it as "the oral autopsy." At most Sibert and O'Neill reported a casual comment by a doctor. Reference to the report of 12/9/63 appears to be to CD 1.

Note in the last graf's explanation of how the FBI was wrong to make it appear not to have been wrong, the location of the incision and of the wound to which Dr. Perry referred is not given, but that where there is location reference, it is to the back, not the front of the neck. Note also that Lumes never said the wound referred to was "in the high back."

The FBI faced two major problems, aside from being wrong: there was no excuse for either the initial error or its repetition, and it was determined to suppress anything indicating a second assassin. The autopsy protocol was drafted and available to the FBI 11/24/63. It refused a copy later and didn't ask for it then.

As of this date, 11/1/66, I had a hotshot Baltimore Sun reporter steamed up and questioning Dr. Boswell. Someone liked Boswell's bullshit explanations so well they leaked them to AP before the Sun's story was out and AP's got international distribution. The result drew attention to the FBI's reporting errors.

HW 4/3/85

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Reference is made to the question as to why the original and inaccurate account of the autopsy on the body of the late President Kennedy could be left standing in the FBI supplemental report January 13, 1964, inasmuch as the FBI admittedly received the official autopsy report over two weeks before such date of the supplemental report.

The FBI supplemental report on January 13, 1964, carried the statement "Medical examination of the President's body had revealed that the bullet which entered his back had penetrated to a distance of less than a finger length." This statement was in reference to information obtained by Special Agents Francis X. O'Neill, Jr., and James W. Sibert on the evening of November 22, 1963, from Commander James J. Humes, Chief Pathologist, Bethesda Naval Hospital, who conducted the autopsy on the body of the late President John F. Kennedy.

Immediately after reporting this statement in the FBI supplemental report, there is reported information from the FBI Laboratory examination of the clothing worn by President Kennedy at the time of the assassination. It was pointed out that a slit which had the characteristics of an exit hole for a projectile was found in the shirt of the late President. It was also reported that there was a nick on the left side of the tie knot which possibly was caused by the same projectile as it passed through the shirt. The purpose of reporting the aforementioned data in this fashion was to emphasize the apparent discrepancies between the oral autopsy report which had originally been more fully reported in the FBI report of December 9, 1963, and the results of the FBI Laboratory examination of President Kennedy's clothing worn at the time of the assassination. No conclusion was reported in connection with this comparison.

The FBI was aware that the President's Commission was in possession of the complete written autopsy report which had been prepared by medical personnel at the Bethesda Naval Hospital in connection with the autopsy of the body of the late President John F. Kennedy. In this connection, it will be noted that in the Commission's Report on pages 87-89, it is reported that Commander Humes who conducted the autopsy concluded the bullet which caused the wound in President Kennedy's body in the high back or neck area had been cut away by a tracheotomy performed on President Kennedy by Dr. Perry at Parkland Hospital in Dallas on the afternoon of November 22, 1963, in a vain attempt to save the President's life. Dr. Perry has corroborated the fact that he used the missile wound in the President's neck as the point of incision when the tracheotomy was performed.

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