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Interview with Doctor Robert Kranei, who retired July 1, 1991 as director of the Armed Forces Institute of Pathology. Dr. Kranei was present throughout nearly all of the autopsy of President John F. Kennedy, and was a U.S. Navy pathologist. A follow-up to this interview is in progress.

1) Whether Kennedy had Potts disease. "There was no report, as you know, on the adrenals," I said. "Mainly because they couldn't find them," Kranei said.

"They couldn't find his adrenals?"

"Right. There was nothing there."

"You mean...if they atrophied, that is what will happen--there is nothing left?"

"Right. Jim (Humes) and Jay (Boswell) worked long and hard in that fatty tissue in the adrenal-renal area looking for them, and didn't find anything that looked anything like adrenals."

"Oh, boy."

"And he had been on steroids of course, for many years, and he was Cushionoid, he had the hump back--the whole nine yards, as far as being on external steroids. A combination of the two--atrophy of the adrenals and then of course the exogenous steroids contributed to that. There was total atrophy as far as we can see at the autopsy. I mean they cut that fat to a fair thee well trying to find anything that looked like adrenals, and there just wasn't."

"Yeah."

On Humes' statement on adrenals to HSCA doctors.

"Basically they looked for them and they couldn't find them."

Doubts that he had Potts disease. "They did not specifically go ahead and look for anything like that, that night."

"He did have injuries to the spinal column there. That's documented. He had back injury."

"Do you mean the fused discs from the operation in 1954?"

"That's right."

Confirms "that is probably true" that JFK would have died from the steroid treatments. "You are trying to replace the steroids that the adrenals (normally produce.)"

"All I can say is that Jim and Jay were really handicapped that night with regards to performing the autopsy."

"Was that Burkley?"

"NO. Robert (Kennedy) was really limiting the autopsy."

"In the end, don't you think they performed a complete and

good autopsy?"

"I think it was as complete as they were allowed to do. I mean, normally they would have gone into the spinal column and taken the spinal cord and all that sort of thing. And they were not allowed to do that. And there was no way they could have looked at the spinal column there to see if there was any disease in the spinal column."

"They didn't remove the spinal column?"

"No. No. Not that I can remember. I am almost sure they did not touch the spinal column. At first we were not even allowed to extend the incisions to examine the brain. I mean, it was really--(laughs) it was sort of hairy there during the night!"

"You were in the room, right?"

"Yes. I was in and out."

"Did you know a Doctor George Bakeman?"

"Bakeman?"

"The FBI report lists a Doctor George Bakeman as being present, and nobody knows who this person is."

"I have no idea who Bakeman is. Unless he got in there early in the evening and came in with the body. But, no, I don't know anybody by that name that I allowed in the room."

"You were at the door?"

"Yes. I was in charge of the Marine guard to make certain that nobody got in or out of the room."

"Were you inside the room?"

"Yes. I was inside. I was in and out all night long."

"Do you remember the enlisted men that were there, like Paul O'Connor, or Jim Jenkins?"

"Yeah. I'm trying to think of what their names were, now."

"Paul O'Connor was about 22 or 24. Jenkins was nineteen. He was very close to Boswell, I think--helping him."

"There were actually three enlisted people in the room, if I remember right now....and a civilian, Mr. Stringer, the photographer."

"There was Floyd Riebe, the Navy enlisted photographer. And Jerrol Custer, the X-ray tech."

"Yeah, I forgot about him."

"So the spinal cord was not removed, so there was no opportunity to take tissue samples from it or study whether or not he might have actually had TB of the spine?"

"No, I don't remember the spinal column ever being touched."

"Have you performed a number of autopsies?"

"Oh yeah, I've done a couple hundred."

"You are not a forensic pathologist, are you?"

"No, no. I'm a hospital pathologist, but I have done a lot of forensic cases."

"If a brain is hit by a bullet, what are the chances--I guess there are about 12 or 14 nerve and vessel endings

attaching it to the skull--excuse me, I'm hindered because I am not a doctor and anatomically correct--What are the chances of a bullet just completely loosen it from the brain stem and these other nerve endings and so on?"

"It depends on where the bullet has hit. The injury that he (Kennedy) had caused a lot of damage throughout the brain. He basically was brain dead. There is no way that that brain would have ever functioned from what I could see at the autopsy table. A lot of it was missing, and the part that was there was all ragged."

"The large defect was in the very back of the head?"

"Right, yeah."

"You wouldn't say it was in the front of the head, or the right side of the head, or the top of the head?"

"No. Most of the brain that was missing was in the back part of the head."

"The brain? And how about the bone? Same place?"

"Yeah. Most of the bone that was missing was destroyed in the back of the head."

"The official report says that they started at 8 or 8:15. Does that mean when the Y incision was made or when they began examining the head after the photographs were taken?"

"Whenever they begin examining the body, that is when the autopsy starts. It doesn't necessarily start with the Y incision. The Y incision occurred a long time later."

"A couple of hours, maybe?"

"Yeah. We had to get permission all of the time from Mrs. Kennedy to proceed with the autopsy."

"My understanding is that they just had to extend the sagittal suture and maybe one or two fracture lines just by even less than an inch of a cut in order to obtain the brain, and then--one description I had is that it just fell out into Humes' hands."

"It was pretty fragmented. I was not in the room exactly at the time they took the brain out. They called me out for something. I was not in the room when they actually took the brain out."

"But Humes would have mentioned to you..."

"Yeah."

"Did he mention to you whether or not it fell out without his having to cut the brain stem?"

"Uh, I don't remember his having said that. Normally, the cut is made through the medulla oblongata, in order to get the brain stem and that part out of it."

"Is that beneath the floor of the skull?"

"Yeah."

"Is the medulla what we would normally call the brain stem?"

"Yeah."

"So, they had to cut that, or necessarily, or could the

bullet have torn it loose?"

"Ah, the bullet would not have torn that loose. That was down deep in the brain. At the base of the brain. Now, how much of the temporal, parietal, and occipital lobes could have fallen out superior to the membrane that is there--between the top part of the brain and the cerebellum, I'm not sure whether that could have fallen out when they opened the scalp and take out the brain or not. The brain that I saw was markedly haemorrhagic. I did see it when it was out of there."

"The enlisted man who took the brain and turned it over and put it into the gauze sling and infused it, examined it quite closely. He felt that the brain stem was neatly severed. The problem that I have is that did he not see--maybe Humes severed it, but there has been a question raging (I'm sure you have heard about it) whether or not somebody had access to the brain at Parkland or somewhere?"

"Nobody got to it and Parkland, I can tell you that. The opening in the scalp was not big enough to go ahead and take the brain out."

"I have met with the funeral people from Gawler's and they described very very specifically what was left when they put the head back together, and he stated that there was not enough scalp, but it was on the back of the head as big as the palm of your hand, but they could not cover that area, and that is exactly where the large defect was, which was larger than the missing area of scalp entirely on the back of the head. They didn't have to worry about it because the head was on the pillow and it did not show. Does that square with what you recall?"

"Pretty much."

"I don't want to ask leading questions,

"They did a real good job. There was a sort of a laceration that extended beyond the hairline in front. They did a tremendous job of fixing that up."

"You mean on the forehead?"

"Yeah. So that was really--they did a great job that night. You could hardly tell where that laceration was."

"Was it a sort of V shaped triangle pointing at the right eye, about half an inch into the forehead?"

"Yeah, something like that. boy, you are really trying to drag up something"

"If I send you some of the pictures, maybe you could tell me if it is accurate or not?"

"Yeah. You know, it just extended beyond the hairline. It wasn't very far. A half inch sounds about right. It was just beyond the hairline. They sutured it and covered it with a wax, I guess--is what they use. It was great, I mean, you couldn't tell where it was, unless you knew what was there."

"Was there a--one of the funeral men said there was a small hole in the temple that he put wax in. He said that he didn't have to do anything more with it. He didn't have to use

cosmetics. The wax took care of it. It was in the sideburn. He felt that it was from a fragment that came out. But he couldn't remember which side of the head that it was on. Do you remember that? Did you see them put the head together, right?"

"Yeah, at the end there, when they were starting to close things up--the only hole that I remember them doing anything with was that laceration, but I don't remember any other hole being there."

"In the forehead?"

"In the forehead, yeah."

"Was all that frontal bone in front of the coronal suture, was that all intact other than a fracture?"

"I'm trying to remember--"

"The right side of the face?"

"Quite a bit of it was there. I mean, ah... There was more than there--I mean, normally you would have to cut part of that out in order to get the brain out."

"In the frontal bone?"

"Yeah. I mean, it would--what I am trying to say is that normally when you make your incision to take the skull cap off, the incision would have been forward of where the fracture was, where it disappeared again."

"The problem that we have is that the X-rays of the skull that were released have no--the whole right front of face is missing. There is no large defect in the back of the head. In fact there is no large defect anywhere else on the head."

"WHAT?"

"I'm going to send you this." (He gives me his address.)

"This is the thing, I feel, I've studied this for a long time--my feeling is that Humes did a very good job, but that something happened along the way to distort this evidence very drastically. And, in other words, pictures were released of the back of the head, for instance, which show an entirely intact back of the head. Every single medical witness, including Jackie Kennedy, every doctor, every nurse in Dallas who saw these pictures say that they are fake. The X-rays don't show the wounds. There are serious problems with all this stuff that has been fielded. And, of course, I've badly wanted to talk to someone who knows something about this."

"Have you talked to Jim or Jay?"

"I have tried to, but when I brought up the possibility that this material is forged, they terminated the discussion. I think the reason is that they were forced--and you would know better than I--but they were forced to agree...Let me put it this way, in 1977 there was a meeting of a panel of doctors set up by the House, and they met with Humes and Jay and they were presented with these photos and X-rays, and Humes and Jay insisted that the entry hole in the back of the head was four to five inches away from where it was in the autopsy report and

from where they had seen it. Did you know this?"

"No, no."

"They repeatedly stated that--in fact they both answered in unison, 'no, that's not the entrance wound.' So the Committee commented on this in their report, upon 'the persistent disparity between its findings and those of the autopsy pathologists.' So the end result of this is that all these years those poor doctors have been accused all these years of having made mistakes. That they did something stupid in their work. Same thing for the Dallas doctors. The Dallas doctors repeated to me this year, insisting that the hole in the throat was an entry wound."

"That was definitely was an exit wound."

"Did you examine that wound?"

"No, I did not. But I read where the Dallas doctors retracted that."

"No, I am sorry but they never admitted it. Perry is the only one that sounds like he is waffling. He sounds like he reversed himself, but he really did not."

"Wasn't that in the Warren Report?"

"I think the Report says it, but it was only an assumption. They hadn't even seen, they did not even know that there was a bullet hole in the throat."

"At first, yeah, but there was a bullet hole in the neck. they couldn't find the exit wound."

"They didn't know there was a bullet hole in the throat. All they saw was the trach incision."

"Right. Once they talked to the doctors in Dallas, this is around midnight, I think."

"No, it was the next day when he called Perry."

"Next day?"

"Yes. The body was already gone."

"I was convinced they talked to somebody that night, and finally decided that had to be the exit wound. Pierre Finck, I think, talked to somebody."

"No, the only person that called was Humes. While you were there, there were people in the gallery that were trying to force the issue and say 'did the bullet come out the throat?' But at the time there was no knowledge that there was a bullet hole of any kind in the throat. "

"For some reason I thought they had discovered that around midnight. Maybe it was the next day."

"Yes, it was the next day when Humes was sitting at home and called Perry."

"Do you think that the brain--in your experience with a gunshot wound--that it could have just fallen out of the head into his hands. The description we have is that when he made these very small cuts, maybe two or three cuts to remove the brain--they weren't even an inch long--that it just fell into

his hands. Could this happen normally, at least some of the time?"

"Its possible. Especially with a lot of ricochet and so forth, a lot of fragmentation, that it could go ahead and be markedly fragmented. But I don't remember it being that fragmented to where it would fall out like that.

"The man who infused it, who put it into the gauze sling and put the needles into the veins--he says that the brain stem was neatly cut across, and that it had fallen out into Humes' hands. It raises the question as to whether somewhere if someone had gotten access to it. So far, I don't see when it could have happened. I am checking every possibility."

"As I said, the hole in the skull was not big enough for someone to have gotten in there and taken the brain out at the time."

"When it came in?"

"Right."

"When Doctor Humes came out of that meeting of the panel of doctors for the House Committee, he said to a reporter, 'they didn't ask the right questions.' We have always wondered, what is the right question? Do you think that Kennedy was hit twice in the head, which the film seems to indicate. Do you have any indication that was a possibility?"

"There were two bullets that hit him, if I remember right now. There are a lot of cobwebs I am trying to get rid of right now. There was one in the neck, and one in the skull. That was the only two bullets that there was any evidence of."

"You know that the photograph of the back appears to show two bullet holes. One is six or seven inches down on the back to the right of the spine, and the other is up on the soft muscles of the shoulder. This seems to be a little bit suspicious. the question is, what is going on here?"

"Yes."

On Potts disease.

"All I can say is that they did not find the adrenals, so Addison's would have been a good example of that, for the adrenals to disappear like that."

"You're sure of this?"

"Yeah, I saw them trying to cut that perirenal fat to a fair thee well trying to find anything that looked like an adrenal. It wasn't there."

"Nobody got a look at the spine area?"

"Not that I remember. I don't remember anybody going into the spinal area to take a look there."

"Were you there when the casket came in? When the body came in?"

"No. I had my altercation with the press there at the time

the body was brought in."

"Was that around the back of the hospital?"

"No, that was in the front. It would be in the passageway leading back to the morgue area."

"Which was downstairs?"

"Yes, it was on the same level--it was right outside the elevators that led back to the autopsy room."

"Could they have had any kind of a decoy thing going on to try to avoid the crowds? Did they have two caskets or two ambulances? Did they go to the old morgue which I think still had the cold room?"

"The old morgue was no longer used, and there were no refrigerators there anymore. That had been closed down for a long time, and they had moved into the new morgue."

"Where the cafeteria is now."

"Right."

X-444  
"The new morgue is the only place where the casket could have been delivered?"

"As far as I know."

Could the Navy ambulance have come to the emergency room in the other wing? One of the Navy men described in the newspapers the body being delivered there and being trundled down the corridors to the morgue at the other end of the hospital."

"No, no, no, no. It definitely came in the loading dock, because the only passageway to get back there would have been through me and the Marine guard. Nobody came through that way."

"Do you feel that there was anybody in that room--that there was no opportunity for somebody in that room to somehow distort the autopsy itself, or to I know there were some fragments found, and Dr. Osborne at one time stated that a whole bullet rolled out of the wrappings, or fell out when the back was lifted from the table."

"I had heard that, but I never saw any whole bullet. All I ever saw were fragments that night. "

"You would have heard about that, right?"

"Yeah."

Telling him about the Clark panel finding a bullet stuck on the outer table of the skull, and an entry wound in the cowlick.

"No, but bullets can do odd things once they get inside the skull. They can ricochet back and forth and that sort of thing depending on the velocity of the bullet and all this sort of thing. Dr. Perry is much better at that, as he is a real firearms expert."

Asking him about Cpt. or Doctor Brown. He first thought he might have been chief of surgery. "There was a Cpt Brown who subsequently became the Surgeon General, if that is the one you are talking about. I can't recall the first name. Might be Roy.



I ask him if he knows anything about the Custer story of taping frags to bone the next day. "I never heard that one."

"I'm going to send you the Clark Panel Report with that statement that on the outer table of the skull there is a large fragment on the outer table of the skull in the area I have described to you."

"That's hard to believe."

"Does it raise your curiosity?"

"(Laughs heartily) Yeah, it makes you wonder if maybe, somehow, its kind of hard to believe that maybe some of the X-rays and photos maybe they played around with them the next day and they got mixed in with the ones that were taken. the Secret Service people they confiscated everything that night."

"Had you heard that they had been playing around with X-rays the next day?"

"No, that is the first I've heard of that."

"Do you have any reason to suspect, or did Humes, Boswell, or Finck have any reason to suspect that the Secret Service was doing something strange in this case?"

"No. All I know is that the confiscated everything that night. And then they set a Secret Service man beside the tissue processor all night long. The next day when they put the tissues in to be processed for the histologic sections, they had Secret Service man beside the tissue processor, and when they took the sections, when they put the trimmings on the block, they confiscated all those trimmings. They didn't let anything go."

"Have you ever heard of Doctor Lattimer? The urologist? He states in an article that the adrenals were clearly visible and unremarkable in the autopsy X-rays."

"Bullshit."

"Now you're talking!"

"My understanding is that you can't see them, not without a lot of dye, if there are adrenals."

"Its kind of hard to see them on a flat plate, number one."

"There were obviously a lot of problems in doing the autopsy that evening. I have to really take my hat off to Jim and Jay for keeping as cool as they were."

#### PROBING BACK WOUND

"Dr. Finck was very clear that that wound in the back did not go anywhere," I said.

"He couldn't get it to go anywhere--the one in the back of the neck--he couldn't get it to go anywhere because his probe would not go anywhere."

"Did you watch this probing?"

"I didn't watch all of it. I know that he was having a hard time. They did have the body--trying to sit it up and trying to get that probe to go--"

"Why didn't they turn the body over?"

"Well, they did. They tried every which way to go ahead, and try to move it around, but the rigour mortis was getting to be a problem."

"But this was after the Y incision?"

"Yes."

"The men described being able to see the end of the finger and the probe from inside the empty chest."

"They were working all night long with probes trying to make out where that bullet was going on the back there."

"They spent some hours on it?"

"It was a long time. I don't know how long it was."

"Just on that?"

"Just on that, trying to figure out where in the dickens that went."

"Wasn't it about six inches down on the back? Where would the third thoracic vertebrae be?"

"The third thoracic vertebra would be about...."

"Wouldn't that be about six inches down?"

"Something like that. It not be six inches down from the shoulders. It would be from the base of the skull."

"The third thoracic?"

"I'm trying to think, now--if it was that low or not."

"Well, you know, the holes in his coat and shirt were six inches down?"

"They were?"

"Yes. When I send you a copy of the photograph of the back you will notice two apparent bullet holes, and one of them is down about six or seven inches. The other is up in the soft shoulder, which we think may be painted in."

"Well, I think they did the very best job under the circumstances, and everything after that is a lie," I said.

"Well, I agree with that."