autopsy photograph with the back of the scalp intact, Ebersole commented, "You know, my recollection is more of a gaping occipital wound than this but I can certainly not state that this is the way it looked. Again we are relying on a 15 year old recollection. But had you asked me without seeing these or seeing the pictures, you know, I would have put the wound here rather than more foreward." (HSCA interview with Ebersole, 3-11-78, p. 62). Yet Ebersole claimed that "I had the opportunity (to examine the back of JFK's head while positioning the head for X-rays) (HSCA Ebersole interview, 3-11-78, p. 64). Later Ebersole said, "...perhaps about 12:30 (AM) a large fragment of the occipital bone was received from Dallas and at Dr. Finck's request I X-rayed these (sic)..." If an occipital bone fragment did arrive late for the autopsy, the defect must indeed have been posterior. The occipital bone is at the base of the rear of the skull. No diagram from Dr. Ebersole has been released by the HSCA.

Philip C. Wehle—then Commanding officer of the military District of Washington, D.C., described the head wound to the . HSCA's Andy Purdy on 8–19–77, who reported, "(Wehle) noticed a slight bruise over the right temple of the President but did not see any significant damage to any other part of the head. He noted that the wound was in the back of the head so he would not see it because the President was lying face up; he also said he did not see any damage to the top of the head, but said the President had a lot of hair which could have hidden that..." (Emphasis added. HSCA record #10010042, agency file #002086, p. 2) The author is unaware of any diagram Wehle might have prepared for the HSCA.

Chester H. Boyers "was stationed at Bethesda naval hospital and was the chief Petty Officer in charge of the Pathology Department in November 1963." (HSCA Telephone contact—Mark Flanagan, 4–25–78, rec#13614). Flanagan reported, "In regard to the wounds Boyers recalls an entrance wound in the rear of the head to the right of the external occipital protuberance which exited along the top, right side of the head towards the rear and just above the right eyebrow." (Emphasis added. HSCA Telephone contact—Mark Flanagan, 4–25–78, rec #13614, p. 2).

FBI agent Francis X. O'Neill prepared a diagram from the HSCA showing a defect in the right rear quadrant of JFK's skull. The author is unaware of any interview with O'Neill among the files released by the HSCA.

The only comment I found in HSCA interviews that is not frankly incompatible with the photographic images, which

only imperfectly suggest an anterolateral defect (personal opinion having seen the original images at the National Archives by permission of the JFK family), is that attributed to Captain John Stover, then Commanding Officer of the National Naval Medical School. The HSCA's Mark Flanagan reported, "Stover observed...a wound on the top of the head..." Stover's description is so ambiguous to be of no use to either side of the debate.

That the HSCA's interpretations of its interviews with Bethesda witnesses are so at variance with what these people actually said suggests there may have been another reason the HSCA wished the documents to be publicly unavailable for 50 years. Whether Parkland and Bethesda witnesses both miraculously made the identical error in describing a right–rear defect, rather than a right–front defect, is problematic to say the least. Whatever the truth, the HSCA did no service to the truth by misrepresenting its own witnesses to dishonestly settle the still simmering controversy of where JFK's skull defect was. Nor did the HSCA do service to the taxpayers who supported its work, and who must now warily regard its medical conclusions.

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THE LATE ARRIVING FRAGMENT: REALITY BITES

by Randy Robertson, M.D.

During the assassination of President Kennedy a large fragment of skull was removed which was later presented to the autopsy team during the later stages of the autopsy where it was determined to represent a portion of an exit wound. By evaluating the films of the assassination as well as the radiographs and eyewitness descriptions of this piece of skull, it can be shown that it originated from the top rear of the skull and was displaced by a second gunshot wound to the head.

The backward head snap, following an initial forward movement, seen on the Zapruder and Nix films, has long been

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cited as evidence for a second gunshot wound to the head originating from the right front of the motorcade. Incident to this backward motion, these films show the expulsion of a large bone fragment onto the trunk of the limousine, affirming eyewitness observations of Charles Brehm and Clint Hill. These films further show that Jacqueline Kennedy recovered this fragment and brought it back into the limousine. The limousine then proceeded to Parkland Hospital where it was secured and transported to Love Field where it was loaded aboard a C130 transport plane and returned to Andrews Air Force Base where it arrived at 8 p.m. Roy Kellerman, having previously arrived at AAFB aboard Air Force 1, instructed Chief Rowley that the limousine should be gone over for any possible evidence that it might contain. After landing at AAFB the limousine was taken under escort to the White House garage, arriving at 9 p.m. At 10:10 p.m., representatives from Dr. Burkley's office, William Martinell and Thomas Mills, accompanied by Deputy Chief Paterni and SAIC Boring, arrived at the White House garage, inspected the vehicle and retrieved three bone fragments. [1] These were then taken to Bethesda Naval Medical Center where the autopsy was still in progress. Immediately following this, three 10 X 12 inch radiographs of these skull fragments were taken. Having previously typed a receipt for the eight 14 X 17 inch body radiographs and three 10 X 12 inch skull radiographs taken before these fragments arrived, Dr. John Ebersole hand corrected this receipt, changing the number of 10 X 12 inch Xrays from three to six, reflecting the additional three radiographs of these three late arriving fragments taken after the receipt had originally been typed. The report by FBI agents Sibert and O'Neill failed to reflect this change, as it indicated only the 11 X-rays noted in the original typewritten receipt. The autopsy report and the Sibert and O'Neill report made from notes made during the autopsy indicate that the largest fragment measured 10 X 6.5 cm and that the radiographs revealed small metallic particles imbedded in one corner. This same corner exhibited external beveling upon visual inspection. These findings indicated that this largest skull fragment contained a portion of an exit wound for a bullet. On 11/29/63, FBI agents Sibert and O'Neill interviewed SAIC of the White House Detail Gerald Behn who confirmed that this large skull fragment had been retrieved from the back seat of the limousine. The final disposition of this and other skull fragments is not known, although records show that the Harper fragment, which was recovered later, was forwarded

to Dr. Burkley after inspection by the FBI. [2]

The arrival of this large late arriving fragment was a significant development during the autopsy. When testifying before the WC, Drs. Humes and Finck stated that, prior to the arrival of this bone fragment, an examination of the margins of the large defect in the skull failed to reveal a specific point where a bullet might have exited the skull. [3] They curiously did not avail themselves of the considerable assistance the skull radiographs should have provided them in this regard. Instead, they told the Commission members about dual fragment trajectories and the major portion of the bullet exiting somewhere in the middle of the large defect. It was after the large fragment's arrival that they came to the profound conclusion that the large fragment represented a portion of the exit defect somewhere in the intentionally vague right parietotemporooccipital area. Both stated that they were unable to locate precisely this bone in the large defect. [4] Until the autopsy photographs and radiographs became available, these contentions could not be challenged. Autopsy photograph #44 clearly shows half of an exit defect exhibiting external beveling in the right frontal bone, which must have been even more obvious to the autopsy team upon direct inspection the night of the autopsy. Logic dictates that, since the radiographs revealed two metal fragments which were recovered in the right frontal area and the late arriving fragment had metal particles imbedded in one corner, that this should have presented little challenge to conclude that this corner should have been situated in the front of the skull, Further, this is the only logical point for the exit of a high velocity bullet which entered from behind. One must guestion why the autopsy doctors committed perjury before the WC by denying that this defect existed and their inexplicable inability to deduce the correct orientation of the large late arriving fragment, given the many clues which should have guided them to its correct orientation and location. The answer to these questions was provided to author Josiah Thompson by Dr. Boswell in an interview that occurred one week prior to the January 1967 DOJ review.

While being interviewed by Josiah Thompson for Six Seconds in Dallas, Dr. Boswell revealed that the autopsy team had been able to locate the large late arriving fragment the night of the autopsy. Logic dictates that this should have been, and by Dr. Boswell's accounts was, accomplished. Dr. Boswell revealed to Thompson that this large late arriving fragment could be oriented because one of its edges matched an edge

on the intact skull so that it fit at the very crown of the President's head on the midline. [5] These very specific assertions are supported by the radiographs of this fragment which show a portion of a suture present on one edge. Given Dr. Boswell's assertions, this portion of suture on the late arriving fragment would represent a segment of the midline sagittal suture. The skull radiographs show that the corresponding segment of the sagittal suture is missing in this area near the rear of the skull. In this position, the corner which contains a portion of an exit wound would be oriented to the rear of the skull at the crown of the head, just as Thompson had been told by Dr. Boswell. Dr. Boswell's candid statement, completely supported by the radiographs and films of the assassination, exposed part of their perjury before the WC about not being able to orient this fragment and its correct orientation. The autopsy photos reveal the other part of their lies in this regard. In further previous testimony before the WC, they contended that there was no evidence of where a bullet might have exited in the margins of the large defect in the skull. It has been the consensus of experts and other observers, including myself, that autopsy photo #44 clearly demonstrates external beveling and represents a portion of a frontal exit wound. In the 1966 Inventory the autopsy doctors realized that this photo documented what they said under oath had been nonexistent the night of the autopsy. In an effort to hide their previous perjury, they intentionally misidentified this photo, which depicts external beveling, as depicting a portion of an entrance wound in the rear of the skull. [6] This has caused considerable confusion among critics, who would like to believe that this particular misidentified photo represents a portion of an externally beveled exit wound in the rear of the skull. In fact, the photo's correct orientation and interpretation provides much more damning evidence as we will see. The DOJ, in drafting the 1967 review for the autopsy doctors to sign, included in the statement the apparently logical conclusion that the late arriving fragment, having one half of a single exit hole, would fit in the front of the skull where the other half of an exit hole was depicted in the autopsy photographs. The autopsy doctors could not object to this logic, for to do so would indicate two separate exit wounds and evidence for conspiracy. We can now understand the original reasons for their perjury. The night of the autopsy they knew that the correct orientation of the large late arriving fragment's exit portion was towards the rear of the head. Boswell's candid revelation to Thompson, completely supported by the radiographs and films of the assassination, proves this. In order not to reveal the presence of an exit wound in the rear of the skull, they denied the existence of a portion of another exit defect in the front of the skull which should have led them to its correct position. This allowed them to be intentionally vague as to where exactly this late arriving fragment fit. By signing the 1967 review, which included an accurate description of this frontal exit wound in the autopsy photos, the autopsy doctors confirmed their own perjury.

A critical evaluation of testimony and interviews of other eyewitnesses from both the WC and recently released documents from the HSCA investigation reveals others who bear witness to the fact that the late arriving fragment comprised a portion of an exit wound in the rear of the skull. Clint Hill's and Charles Brehm's statements about seeing a large bone fragment coming off the rear of the skull have previously been mentioned. Roy Kellerman, in his WC testimony, discussed the large piece of bone removed from the skull during the assassination and recovered from the limo in a way consistent with Boswell's. Kellerman said that the bullet which entered from behind made a small hole of entry in the rear of the skull which was located in intact bone 2 inches below from where the large piece of bone had been removed. Kellerman went on further to tell the WC members present that he could not conceive of how a bullet had accomplished this trajectory and we should share his skepticism of the ability of a single bullet to both enter and exit the back of the head. [7] Dr. John Ebersole told HSCA investigators that a large portion of occipital bone was brought into the autopsy room late and Xrayed. [8] Certainly this large fragment of skull described by Dr. Ebersole must be the same fragment so accurately identified by Dr. Boswell. The existing skull X-rays show the occipital bone proper to be fractured but intact, but Dr. Ebersole's statement confirms the testimony of others that this skull fragment originated from the top rear of the skull or right occipital area. FBI agent Sibert told these same investigators that the wound was in the upper back of the head and that the missing section of bone arrived later. [9] Almost all of the eyewitness accounts both at Parkland and Bethesda are of an exit wound being present in the top rear of the skull.

Strong corroborative photographic evidence of a separate exit wound being present in the top rear of the skull is present in the Zapruder and Nix films. At frame 313 of the Zapruder film, we see several smaller fragments of bone being ejected

from the front of the skull in several different directions. By virtue of its size, the 10 X 6.5 cm late arriving fragment, which contained a portion of an exit wound, was the largest skull fragment to have been displaced from the President's head. Had this large, late arriving fragment actually comprised a portion of the exit wound in the front of the skull, we should see only one large fragment of bone being ejected from this area on frame 313. Autopsy photo #44 shows that there was no bone loss forward of this frontal exit hole. Instead, we see several separate fragments being exploded from the front of the skull in the immediate vicinity of the exit hole documented in this photo. Given that there is no bone loss forward of this half of an exit hole in this photo, it would be most likely that the skull fragment seen ejected almost straight forward on frame 313 would be the one which arose immediately adjacent to this exit hole. Furthermore, it is virtually impossible for any of the fragments seen ejected so far from the limousine on frame 313 to meet the requirement of falling back into the limousine to be recovered there later, as the late arriving fragment was. Thus by virtue of the fact that frame 313 shows several smaller fragments of bone being ejected from a focus immediately adjacent to the frontal exit hole at speeds, distances, and directions making it virtually impossible for them to have been recovered from the limousine, it is a simple matter of elimination that the largest skull fragment ejected from the skull arose from the back of the skull. The Harper fragment, based upon its relative size and site of recovery, is most likely the skull fragment which is ejected in the higher trajectory on frame 313. The smaller skull fragment that is seen ejected straight forward of the limousine is most likely the one recovered near the south curb of the parkway by Seymour Weitzman and eventually forwarded to Dr. Burkley. [10] Beyond this, both the Zapruder and Nix films provide direct evidence of the ejection of a large skull fragment from the top rear of the head incident to the backward head snap at a time removed several frames later than the explosive initial exit wound in the front of the skull. This piece of skull was seen by Charles Brehm and Clint Hill, and the films show Jacqueline Kennedy retrieved this fragment and brought it back into the limousine where it was later recovered, as was confirmed by Gerald Behn.

The fact that the late arriving fragment was returned to the passenger compartment of the limousine precludes it from being the Harper fragment. Additionally, neither the Nix or Zapruder films provide evidence for any skull fragments

having been ejected from the back of the head further than the trunk of the limousine. These films document several bone fragments being ejected from the front of the skull at speeds and distances away from the vehicle which could carry one of them to the grassy area south of Elm Street, where the Harper fragment was recovered that day after the assassination. Finally, the presence of intact occipital bone on the postmortem skull X-rays eliminates the possibility that the Harper fragment is occipital bone. The Zapruder and Nix films support these radiographic findings, as they do not demonstrate skull fragments being ejected distances far from the back of the head; but they do show several smaller fragments arising from the more anterior portions of the head which are propelled far away from the limousine. By comparing the films of the skull fragments as they are exploded from the head with where each fragment was recovered, it is easy to dispel the long held misconception of many critics, fueled by the misidentification by Drs. Harper and Cairns, that the Harper fragment represented occipital bone. By actually proving that this is not the case, it translates into much stronger support for the correct conclusion that the large late arriving fragment formed part of a second exit wound in the top rear of the skull.

The Zapruder and Nix films show that the large exit fragment arose from the back of the head. These films also show that it is impossible for the late arriving fragment to have been one of the several fragments which arose from the front of the skull, and that none of these could have been recovered in the limousine after the assassination. Almost all the eyewitnesses have said that there was an exit in the top rear of the head. Several eyewitnesses have more specifically said that the large late arriving fragment, which contained a portion of an exit wound, could be oriented in the large defect so that it fit in the upper rear of the skull. The postmortem radiographs show that bone is missing in this exact same area and that there are lead fragments in this location that can not be related to the bullet which entered several cm below. The radiographs of the large fragment show it has properties that only allow it to fit in the top rear of the skull and preclude it from fitting adjacent to the exit defect in the front of the skull. All of this is mutually self supportive and proves that a second bullet struck the rear of the skull, driving the President backwards after the fatal wounds.

None of the photographic, radiographic or film evidence extending from Dealey Plaza to Bethesda Naval Medical Center supports the contention of Drs. Harper and Cairns that

the Harper fragment is occipital bone. In contrast, all of this same objective evidence points to the correct conclusion that the Harper fragment was exploded from the more forward portion of the skull to be recovered some 25 feet south of the assassination site.

If a conspiracy actually existed to alter all of the objective evidence in this case to hide an exit wound in the top rear of the skull, it has failed miserably. One must question and ultimately reject the notion that wholesale tampering with the evidence has occurred. Almost always, when a discrepancy exists between eyewitness observations and the objective evidence, in the medical area of this case, it is either the result of a simple error in the eyewitness observation and the conclusions derived therefrom or as a result of a deliberate attempt by individuals to distort or ignore evidence for the benefit of a conclusion favorable to their own viewpoint. I. would cite the demonstrable perjury of Drs. Humes, Boswell and Finck before the Warren Commission in an effort to deny that an exit wound was present in the top rear of the head as a prime example. Is the persistent belief that the Harper fragment is occipital bone and represents a portion of an exit low in the rear of the head another?

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- NARA RG233 HSCA Rec. #180–10099–10390 Agency File #002528.
- NARARG233 HSCA Rec. #7310080 Agency File #004864.
- 3. 7H383, 7H353.
- 4. 7H371, 7H383.
- 5. Six Seconds in Dallas, Josiah Thompson 1967, p. 142.
- Report of Inspection by Naval Medical Staff on November 1, 1966 at National Archives of X–rays and Photographs of Autopsy of President John F. Kennedy, p. 8.
- 7. 7H81, 85.
- NARA RG233 HSCA Rec. #180–10102–10409 Agency File #013617, p. 5.
- NARA RG233 HSCA Rec. #180–10105–10164 Agency File #002191, p. 3.
- 7H107, NARA RG233 HSCA Rec. #180–10087–10092 Agency File #000640.

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TRUE BELIEVERS: TOM SNYDER TALKS
TO ARLEN SPECTER

by Richard Bartholomew

On Tuesday night, May 30, 1995, talk-show host Tom Snyder introduced his "friend" Senator Arlen Specter to his CBS call-in talk show, The Late Late Show with Tom Snyder. He said he knew Senator Specter as an honest man when he last interviewed him 30 years earlier in Philadelphia. Specter spun himself as a presidential candidate who is standing on principle while others are "blowing with the wind or swinging with the political pendulum." He half-jokingly told Snyder, "And now that you've reinterviewed me, I want you to extend that representation of honesty, or else I may own CBS." Snyder did, adding, "You've always been a very straight forward and level guy. I mean you and I both came from the Midwest as does your formidable opponent Robert Dole of Kansas."

Having established himself and Specter as pillars of truth, Snyder put on his trademark look of sincere bewilderment and broached the subject of the people's mistrust of government "in the wake of Oklahoma City." With the camera showing Specter nodding in sad-eyed agreement, Snyder added, "And in extreme cases feel that the government would actually go so far as to plot the bombing in Oklahoma. How do we get rid of this malaise in the body politic? How do we bring these people back to realize that we are the government? You and me and all these people who vote, we are the government."

Missing a golden opportunity to call for the immediate release of all files pertaining to the JFK assassination, a process begun with legislation co-sponsored by himself, Arlen Specter, the reputed author of the Single Bullet Theory, quoted political ethics advice from Richard M. Nixon about how not to alienate the electorate, then said, "So I think the first thing that people of America have to do is insist that their elected officials—the politicians—tell the same story all the time. And if they change, they have to be made accountable."

Specter then spoke of the grave oversight committed when Congress failed to investigate the executive branch after the Waco and Ruby Ridge, Idaho disasters. Specter, who has staunchly defended his own role in an executive branch self-

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