

GOVERNOR CONNALLY'S INJURIES - TRAJECTORY - THIGH WOUND

Statements of Witnesses - Dr. George T. SHIRES

Deposition -

March 23, 1964, 6 H 104-13

He is professor of surgery and chairman of the dept. of surgery, Southwestern Medical School, U. of Texas. With two previous tours of active duty in the Navy, first as research investigator at Bethesda and second as associate surgeon, U.S. Naval Hospital Ship Haven. (p.104)

He was in Galveston at the time of the assassination. Dr. Shires immediately returned, arriving in Dallas while the chest procedures were in progress. He did not initially see the chest wounds (p.105), hence, he declined to identify which was of entry and which of exit. Ditto with the wrist wound, even though he saw them while they were being prepared for surgery. He said he didn't examine them in detail. He described the thigh wound as a 1 cm. punctuate wound. He explored the wound and thought/^{it}"was either a tangential wound or that a larger fragment had penetrated or stopped in the skin and had subsequently fallen out of the entrance wound." The fragment was not removed from the femur. This fragment is 1 to 2 mm. in diameter. It has very slight weight, and he gives only a theoretical answer when asked the size of the bullet required to make such a hole. His operation required only about 20 minutes and he was assisted by Drs. McClelland, Baxter and Patman. (p.106)

Neither Baxter nor McClelland, both of whom testified in Dallas, was called before the Commission. Instead, the Commission sought to use Drs. Shaw and Gregory who had not participated in this particular surgery. Dr. Patman was never called any place. (p.106)

Dr. Shires identifies his report as part of Exhibit 392. He is then asked to describe any treatments and post-operative care. Saying that "for the first several days I saw him approximately every 2 to 4 hours for an hour or so each visit, and many times for 6 and 8 hours

2 - Shires

at a stretch." (p.107) This decreased over the next 3 weeks and also Dr. Shires had seen the Governor since hospitalization ended. Strangely enough, the Governor's only complication seems to have resulted from a catheter cutdown, ending in a "clot in the saphenous vein". He is shown Diagrams 1 through 4 of Gregory Exhibit No. 1, and said they correspond to ~~xxx~~ his recollection. (p.107)

When asked to describe Diagram No. 5, showing a man in a seated position and projecting a trajectory through shoulder, chest, wrist and into thigh and says it was projected through discussion with Mrs. Connally, "which would explain one missile producing all three wounds."

Dr. Shires definitely confirms the statements of Gov. and Mrs. Connally about the Governor having turned to the right and said this would explain how one missile could have caused all three wounds. The doctor is satisfied about the Governor's recollection and says he "definitely remembers turning after hearing the first shot, ~~xxx~~ ^{before} he was struck with a bullet."

Asked if the cyanosis with which the Governor was suffering when admitted to the hospital would have affected his memory "as to what happened before the wound?", the doctor said unequivocally "No." Going further, the doctor said, "I think his memory for events up until the time he recalls falling over in the car is probably accurate." (p.108)

As the discussion continues, he testifies to Connally's recollection of "this striking feeling he had after he was hit" (exactly as Connally subsequently testified before the Commission); of Connally's recollection after being hit, it apparently is quite clear.

With reference to Diagram No. 5 of the Gregory exhibit, he said that all the doctors involved, having discussed it, thought one bullet caused all the Governor's injuries. (p.109)

3 - Shires

Asked if it was possible the Governor could have been struck by two bullets, he replied: "I'm sure it is possible, because missile sites are so variable, depending upon the size of the bullet, the speed at which it travels, whether it was tumbling or not. We have seen all kinds of combinations of entrance and exit wounds and it's just impossible to state with any certainty, looking at a given wound, ^{what} ~~what~~ the nature of the missile was, so I am sure it is possible."

Asked to conjecture if all of the Governor's and the President's non-fatal wounds could have come from the same missile, the doctor reveals how impressed he was by the Governor's account: "I assume that it would be possible. The main thing that would make me think that this was not the case is that he remembers so distinctly hearing a shot and having turned prior to the time he was hit, and in the position he must have been, particularly here in Figure 5, I think it's obvious that he did turn rather sharply to the right and this would make me think that it was a second shot, but this is purely conjecture, of course."

Aside from this, Dr. Shires admits the possibility of one projectile causing the President's non-fatal and all of Governor Connally's wounds. (p.110)

The doctor's opinions about a tangential wound do not help the Commission's case:

"Mr. Specter. Well, is it possible that the bullet could have hit Governor Connally with the thigh being the initial point of impact and do the damage which was done there with the high velocity missile that I have just described for you?

Dr. Shires. Is it possible to get a wound like that)

Mr. Specter. Yes, sir.

Dr. Shires. Yes; as long as it's on a tangent.

4 - Shires

Mr. Specter. Is it likely to receive a wound like that from a high velocity weapon of 2,000 feet per second and at about 160 to 250 feet?

Dr. Shires. If it's a tangential wound, tangential wounds can be very strange. A large bullet can cause a small hole if its on a tangent or a small bullet can rip out a fairly large hole on a tangent. It just depends on the time of contact and the angle of contact with the skin. That's why it's awfully hard to predict.

Mr. Specter. So that wound could have either been the first striking of the Governor from the bullet, or it could have been from a missile whose velocity (p.111) was spent after going through President Kennedy and through the Governor's body and wrist and then caused that wound in the thigh?

Dr. Shires. That's right, if it was a tangential bullet." (p.112)

Dr. Shires had been interviewed by two Secret Service men who subsequently returned "and charted the entrance and exit wounds which you have described previously, or we have looked at previously/in these five diagrams."

Larry, here we now know the source of these phony diagrams. We now know why the entrance and exit wounds on the wrist, especially, were misidentified. Just on p.111, Shires had agreed "it would be more natural" for the palm to be as shown in Diagram 5, even though the fact is to the contrary. This diagram was prepared by the Secret Service, as were the hospital charts.

At the doctor's suggestion - his second one - and following off-the-record discussion, he describes briefly what he found when Oswald was brought in. He also said what efforts were made, including the administration of 15 or 16 pints of blood, but he apparently "suffered ~~such~~

5 - Shires

irreparable anoxia from the initial massive blood loss ..." The doctors continued to try, even after the heartbeat stopped. He said, "There has never been recorded in medical literature recovery from a wound like this." He had said that the bullet "had transgressed virtually every major organ and vessel in the abdominal cavity." (p. 113)

The obvious question that was never asked of Dr. Shires was the distance ~~difference~~ between the point of entry of the thigh wound and the point of lodg^{ment}ing of the fragment. The obvious reason is that it would destroy the reconstruction these boys were cooking up. This bullet had to go three inches inside the leg backwards, leave a fragment, and then work its way up to the point where it could become dislodged. Three inches is too much.

It is also obvious why Dr. Shires was not called to Washington. He was just a little bit too precise in refusing to talk about things of which he had no personal knowledge.