

**THE JAMA DISTORTIONS:
PLAYING FAST AND LOOSE WITH THE MEDICAL EVIDENCE
press kit**

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1. The May 27, 1992, issue of the Journal of the American Medical Association contains two major articles dealing with medical evidence in the death of President John F. Kennedy.
 2. Both these articles offer "proof" that President Kennedy was shot twice from the rear--once in the back of the head and once in the shoulder/neck area, with this bullet emerging through the President's throat.
 3. The findings "prove," according to the articles, that there was no conspiracy in the JFK case. A single assassin, Lee Harvey Oswald, fired these two shots.
 4. The articles include interviews with Drs. James J. Humes and J. Thornton Boswell, who (along with Army pathologist Pierre Finck) performed an autopsy on Kennedy at Bethesda National Naval Medical Center. Both Humes and Boswell vigorously reaffirm their original autopsy findings and ridicule those who insist that Kennedy was shot from the front. The two men insist that Dr. Humes was in charge at the autopsy, no others interfered, and that this was "the least secret autopsy in history."
 5. Dr. George Lundberg, editor of JAMA and a military pathologist, announced these findings at a press conference on May 19. He derided conspiracy theorists as persons motivated by "paranoia" or "profits," and declared that all intelligent persons should consider the medical issues now closed.
 6. The articles (and Dr. Lundberg) also attack Dr. Charles Crenshaw, a Ft. Worth surgeon. In his book "Conspiracy of Silence," Dr. Crenshaw, who was present in the emergency room at Parkland Hospital soon after JFK was brought in just minutes after being shot, has asserted that Kennedy was hit twice from the front--that he saw an entrance wound in the front of Kennedy's throat and a large explosive exit wound in the occipital area at the back of the President's head.
 7. The second article is drawn from interviews with other Parkland doctors who were present in the emergency room. They both dispute Crenshaw's claims and question his motives. With but one exception, the four Parkland doctors interviewed insist that what they saw in the emergency room is not in conflict with the autopsy report or the photographs and X-rays which were taken to document the autopsy findings.
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8. The JAMA article is filled with untruths, distortions and misrepresentations. Much of it is in conflict with official records, including sworn testimony. The JAMA article is the result of shoddy research and editing and is intellectually dishonest.

9. I have prepared a detailed examination of the errors contained in the 14-page article. The errors and corrections run to more than 30 pages!
10. This is a summary of those findings, intended as a guide for those who are concerned about the content of the JAMA article. In the detailed "fact sheets," much more detail is included and all statements are cited with end notes. For example, this summary sheet will point out glaring discrepancies between Dr. Humes' assertions about who was in control in the Bethesda morgue and the sworn testimony of Dr. Pierre Finck at the Shaw trial in New Orleans in 1969. In the actual fact sheet, portions of Finck's testimony are quoted verbatim. In this summary, an explanation is given of the crucial bone fragments brought into the Bethesda morgue during the course of the autopsy. In the actual fact sheet, much more detail is included concerning these fragments.
11. All statements made in this summary are taken from official documents--from the Warren Commission Hearings and Report, from the House Select Committee on Assassinations, from FBI and/or Secret Service documents, from taped interviews with the principals, and from sworn court testimony. There is no material taken from the writings of so-called "conspiracy buffs." The official version of the shooting of JFK is refuted by the official documents available in the case.
12. Three separate articles make up this "press kit" :
 - (a) "Craters and Bevels--Dr. Humes' 'Irrefutable Proof'"
 - (b) "The World's Worst Autopsy and the World's Worst Article About the World's Worst Autopsy"
 - (c) "The Parkland Doctors versus Dr. Charles Crenshaw"

THE WORLD'S WORST AUTOPSY AND THE WORLD'S WORST ARTICLE ABOUT THE WORLD'S WORST AUTOPSY

1. The **JAMA** article asserts that this is the first time Boswell and Humes have spoken out on the autopsy. It says the two men are breaking a long silence.

facts: Boswell was interviewed by Josiah Thompson in 1967 (thereby violating the orders he had signed to remain silent--see note # 5 below); Humes testified on national public television before the HSCA in September, 1978, and Boswell was interviewed twice by assassination researchers as late as 1990 and 1991.

2. Humes asserts that he was in total charge of the autopsy. "I was in charge of the autopsy--period. Nobody tried to interfere--make that perfectly clear." The article contains sidebars with captions: "No generals in morgue" and "Humes was in total charge." Humes says that Admiral Burkley, the President's personal physician, was the only "high-ranking officer in the morgue" and he left soon.

facts: a. The Sibert-O'Neill Report, from two FBI agents who were present at the autopsy, lists all persons known to have been present. Among them: Brigadier-General McHugh, Admiral Galloway, Major General Wehle, Capt. Stover, Capt. Osborne, and Lt. Cdr Cross. There are also indications that Admiral Kinney, Surgeon-General of the Navy, was present.

- b. In contradiction to Humes' statement that Burkley was the only high-ranking officer and he left soon, Admiral Galloway told Warren Commission investigators that he [Galloway] remained throughout the autopsy.

- c. Under oath at the Shaw trial in New Orleans in 1969, Dr. Finck testified that:

- * there were many Admirals and Generals present--in uniform
- * that Dr. Humes asked one of these Generals who was in charge; the General replied, "I am."
- * that someone in uniform ordered the doctors not to dissect the throat wound [Humes claims this was his decision]
- * Finck had previously told investigators that when he asked to see Kennedy's clothing, he was told by an officer that his request "was of academic interest only" and the request was denied. [It is ironic that in the **JAMA** article Dr. Humes states, "If only we had seen the President's clothes, tracking the second bullet would have been a piece of cake, but we didn't have the clothes." Yet Humes says there was no interference.]

Finck also stated that since some required dissections were not done, he had suggested that they mark the autopsy as "incomplete." The

officer said they should mark "complete autopsy." Humes then said to mark "complete autopsy."

3. "[Humes] had performed several autopsies on military personnel killed by gunshot wounds....[Boswell] too, had previously autopsied several gunshot wounds...."

facts: a. neither man was a forensic pathologist

b. HSCA, Volume 1, p. 311: "he [Humes] had not performed autopsies in deaths due to shooting previously-- neither had the other autopsy pathologists. So they were required to do an autopsy that by experience and by the way our society is structured...is reserved for forensic pathologists...."

c. When Humes testified before the Warren Commission, he was asked about this specifically:

SPECTER. What specific experience have you had, if any, with respect to gunshot wounds?

HUMES. My type of practice has been more extensive in the field of natural disease than violence. However, I have had to deal with violent death, accident, suicides, and so forth."

[Clearly, Humes did not directly answer the question. What does "deal with" mean?]

4. Humes admits that the pathologists did not dissect the neck area, in spite of the fact that they had a bullet wound in the upper back/ neck area which seemed to stop about one inch into the flesh, with no lane of exit. Humes says that "Dissecting the neck was totally unnecessary and would have been criminal."

facts: a. It would also have been in conformity with the Armed Forces Institute of Pathology's manual, which requires that the organs of the neck always been examined.

b. Failure to dissect the neck and to trace a mysterious bullet wound caused erroneous reports to be sent from the autopsy room during the night. Failure to dissect the neck area left Dr. Humes to learn that there was a bullet wound in the front of the throat after the autopsy was over and after the body had been embalmed and removed to the White House.

5. Humes called this "probably the least secret autopsy in the history of the world."

facts: a. military security was posted around Bethesda, even within the morgue area.

- b. all who participated were given written orders from the Surgeon General of the Navy not to discuss their duties or what they saw. [As we have seen, Dr. Boswell violated this order.]
- c. Dr. Perry told the Warren Commission that when Dr. Humes called him on Saturday morning and was told that there was a bullet wound in the President's throat, the pathologist told him to discuss with no one what they had talked about.

6. **"The pathologists found two wounds from a high-velocity missile that would later be matched to the military-jacketed bullets fired from above and behind the President by Lee Harvey Oswald.**

fact: a. an absurdity. As anyone knows, bullets cannot be matched to wounds unless the bullets (or pieces large enough to be ballistically-identifiable) are in the body or near it. The body which Humes and Boswell had on the morgue table contained no metal which would have allowed the conclusion stated above.

- b. If one takes this statement at face value, it implies that all of Kennedy's wound, head, neck, and throat, were caused by one bullet. This in a medical journal.

7. **Dr. Humes: "The tracheostomy was a gaping wound about 3 or 4 centimeters around."**

fact: Autopsy report written by Humes: "Situated in the anterior neck at approximately the level of the third and fourth tracheal rings is a 6.5 cm. long transverse wound with widely-gaping irregular edges." Humes told the Warren Commission the wound was 7 or 8 centimeters.

8. **"I believe in the single bullet theory that it struck Governor Connally after exiting the President's throat."--Dr. Humes**

fact: When he testified before the Warren Commission, Dr. Humes said it was "extremely unlikely" that the bullet he was shown [CE399] could have caused the wound in Governor Connally's thigh.

9. **Dr. Boswell: "We documented our findings in spades. It's all there in the record."**

fact: a. photographs of the interior of the chest are missing
b. tissue slides from the entrance of wounds are missing
c. the President's brain is missing
d. Some very strange things are found in the autopsy report-- things which don't belong there. For instance, Dr. Humes' handwritten second draft originally stated, "Three shots were heard and the president fell face downward to the floor of the vehicle..." Humes lined

through this and wrote "fell forward." This is, of course, untrue--Kennedy's head and body flew violently backward. More importantly, why is this in an autopsy report. Humes did not see this; he was 1,200 miles away. This reads more like a brief for the prosecution.

10. Drs Humes and Boswell both assert that they believe Kennedy's "missing" brain was actually buried with his body. They say they gave the brain to Dr. Burkley, who said the Kennedy family wanted to bury it with this body.

facts: More absurdities:

- a. Kennedy was buried at Arlington on November 25.
- b. Humes and Boswell did a supplementary autopsy on the brain on December 6--two weeks later !!
- c. How could the brain have been buried with Kennedy on November 25 if Humes and Boswell had it in their hands two weeks later? And when did they give the brain to Burkley?

11. The article praises the autopsy as thorough and assert that it answers the questions about JFK's wounds. There is not a word of criticism about any of the findings or procedures.

facts: a. It is intellectually dishonest of the editor and/or author not to report that the HSCA medical panel found that Dr. Humes had mis-located the entrance wound in the back of the head by 4 inches, placing the wound in a different bone!

b. Or that Dr. Humes, presented in the article as supremely confident about his autopsy findings, actually caved in before the HSCA panel and acquiesced in their finding not in his autopsy location. Thus, Humes, under oath, supported a different location for the wound than the one he so vigorously champions in the JAMA article.

c. The HSCA medical panel listed three pages of errors made in the Bethesda autopsy, including such things as the failure to measure wounds from proper points, failure to dissect the neck area, "insufficient training and experience to evaluate a death from gunshot wounds," not retaining original notes, not examining the clothing, and not mentioning that the neck had not been dissected.

12. Dr. Humes states categorically that the President did not arrive at the morgue in a body bag. He says there was no body bag anywhere in the area.

facts: a. Medical technician Paul O'Connor, who lifted JFK's body out of the casket, says the body was

in a gray body bag. The HSCA reported O'Connor's observation in 1979.

- b. Assistant photographer Floyd Reibe also states that the body was in a body bag.
- c. Dr. Humes' commanding officer, Captain James Stover of the Bethesda Medical School, said in a taped interview that he remembered a body bag.
- d. The list of autopsy materials turned over to the Secret Service by Dr. Burkley includes the following: "One receipt, dated Nov. 22, 1963, for bed sheet, surgical drapes, and shroud used to cover the body in transit." Captain Stover stated that he felt the "shroud" was a euphemism for the body bag.

13. Dr. Humes: "I'd done gunshot wounds before and this one was perfectly obvious."

- facts:
- a. In point of fact, four hours after the autopsy began (and one hour after it ended, if we accept the doctors' own timetable), they had decided nothing about the nature of either of the two wounds they now allege the President had suffered.
 - b. Until bone fragments were brought into the room from some undetermined source, there was no "hole" in the back of the head, where an entrance wound would later be located.
 - c. Until these bone fragments were brought into the room, no exit wound was observable on the right side of the head. Humes admitted this.
 - d. Humes admits that the exit for the second, the defect in the front of the throat, was not suspected of being a bullet wound until the next morning--after conversations with Dr. Perry--long after Kennedy's body was gone.
 - e. One wonders what did go on for four hours, and what kinds of conclusions would have been reached if the wounds had not been, Humes' words, "perfectly obvious."

NOTE: THIS IS BY NO MEANS ALL THE ERRORS PRESENT IN THE JAMA ARTICLE. TIME PERMITS ONLY THESE CITATIONS.

CRATERS AND BEVELS--DR. HUMES' "IRREFUTABLE PROOF"

1. In the first JAMA article, Dr. Humes states that there can be no doubt about the path of the bullet which passed through President Kennedy's head. This assertion is made several times in remarkably forceful language:
 - * "There was a small elliptical entrance wound on the outside of the back of the skull, where the bullet entered, and a beveled larger wound on the inside of the back of the skull where the bullet tore through and exploded out the right side of the head."
 - * "The pattern of the entrance and exit wounds in the skull proves it, and if we stayed here until hell freezes over, nothing will change this proof. It happens 100 times out of 100 and I will defend it until I die."
 - * "This is the essence of our autopsy, and it is supreme ignorance to argue any other scenario."

STRONG STUFF.

2. What Dr. Humes does NOT say is that neither the CRATERING which allowed him to identify the entrance wound in the rear nor the BEVELING which allowed him to identify the exit wound on the right side of the head was present on the skull of the President when it was brought into the morgue for the autopsy.
3. The pieces of bone on which the tell-tale craters and bevels were found were brought into the autopsy room after midnight (after the autopsy was officially over). No one knows how many bone fragments there were, where these fragments came from, nor who brought them to the Bethesda morgue.
4. Without these bone fragments, the skull of Kennedy presented no evidence of either entry or exit.
5. Let us examine each of these assertions in order:
 - A. There was no entrance bullet hole in the back of Kennedy's skull when it was received for autopsy.
 - * This is made clear in statements by the autopsy doctors themselves. When Boswell and Humes were interviewed by the forensic pathologists of the House Assassinations Committee's medical panel they made these significant points:
 - "...this bone was all gone and actually the smaller fragment fit this piece down here--there was a hole here, only half of which was present in the bone that was intact, and this small piece fit right on there...."
Dr. Boswell (HSCA 7 H 246)
 - "There was a shelf and a little hole came up on the side and then one of the smaller of the two fragments in the X-ray, when that arrived, we were able to fit this down there and complete the circumference of

that bone wound." Dr. Boswell (HSCA 7H 260)

- "...the skull shows a portion of a crater..."
(Dr. Pierre Finck, letter to General Blumberg,
HSCA 7 H 113)
- In a recent taped interview with researcher Harrison Livingstone, Dr. Boswell reaffirmed that only a part of a hole was present on the skull: "I vaguely remember the two pieces of bone....when we reconstructed that, that was a part of the wound of entry. There was one semicircular area on one side that we determined to be a wound of entry. Or a portion of the bone was a wound of entry.....
"It was a semicircular piece of bone, and on one side of that piece of bone there was another hole right in the edge, and there was beveling on one side which showed us which was the inner surface...."
(High Treason 2, p. 198)
- During the Warren Commission's questioning of the Dallas doctors and nurses, each person was asked by Arlen Specter if he or she saw a smaller head wound beneath the large defect. Not a single doctor or nurse saw a smaller wound in the back of the head.

B. What Humes and Boswell had was one huge defect in the back and right side of the head, with a "notch" or "crack" at the back of that defect in the occipital area, just above the external occipital protuberance. Attached to this sheet is an interpretation of this head wound as seen at Bethesda when the body arrived. At the bottom of this sheet is a drawing which Dr. Boswell made on the autopsy face sheet. He confirms that this is his attempt to depict the bone fragments and how they could be used to complete the "entrance hole" in the back of the head.

C. There was no exit wound on the right side of the skull when the body was received at Bethesda.

* This is made clear by Dr. Humes himself in the JAMA article:
"When we recovered the missing bone fragments and reconstructed this gaping wound where the bullet exited, we found this same pattern--a small wound where the bullet struck and a beveled larger wound where it exited..."
"When we received the two missing fragments of the President's skull and were able to piece together two-thirds of the deficit on the right side of the head...."

- * This is consistent with what Humes had said previously. In testimony before the Warren Commission, he described the intact skull, before the arrival of the bone fragments: "A careful examination of the margins of the large bone defect at that point, however, failed to disclose a portion of the skull bearing...a wound of-- a point of impact on the skull." (2 H 353)
- * Dr. Pierre Finck's autopsy notes confirm this: "No exit wound is identifiable at this time in the skull, but close to midnight portions of cranial vault are received from Dallas, Tex....two of the bone specimen reveal beveling...." (HSCA 7 H 122)

- D. Once it is realized that the points of entry and exit were not present on the skull, but were found on bone fragments brought into the morgue around midnight, these fragments take on tremendous significance for the interpretations made at the autopsy.
- E. The existing record tells us nothing definitive about (a) the number of bone fragments; (b) where the fragments came from; (c) who found them; or (d) who transmitted them to the morgue
- a. an FBI report describes large piece of skull (4 x 2.5 inches)
 - b. Dr. Humes told the Warren Commission there were 3.
 - c. X-rays were taken of three pieces of bone.
 - d. In the JAMA article, Humes refers to 2 pieces of bone.
 - e. In an interview with researcher Livingstone, Boswell refers to 2 pieces of bone being received.

As to where the fragments came from:

- a. The FBI report states that Humes "was instructed that this had been removed from the President's skull."
- b. FBI documents released in 1979 indicated that the piece of skull was "flown in from Dallas Hospital."
- c. When he testified before the Warren Commission, Humes first indicated that the FBI had brought the fragments, either from the street in Dallas or from the limousine.
- d. Warren Commission counsel Arlen Specter suggested to Dr. Humes that it may have been the Secret Service which transmitted the fragments.
- e. Gerald Behn, Chief of the White House Detail of the Secret Service, later told the FBI the fragments were found in the limousine. [It is not logical that the bone fragments were found in the limousine. Small fragments of bullets, measured in millimeters, were found in a search of the limousine in the White House garage. There is a record of who found the bullets and what they did with them. It seems unlikely that these

same persons could have overlooked much larger pieces of bone in the same limousine. Moreover, it would seem that if the men who found the bullets also found the bone, a chain of possession for the bone would also exist.]

- f. In a taped interview, Dr. John Ebersole, who took the X-rays for the autopsy, told a researcher that he was called into the office of the "Commanding Officer" and given three pieces of bone, which he carried to Dr. Humes in the morgue. Ebersole did not know how the bone came to be at Bethesda.
- g. It is alarming to learn that the very pieces of bone which make up Humes' "irrefutable scientific proof" are orphans. The House Assassinations Committee concluded: "There is no evidence to show who sent these fragments to Bethesda."
- h. It should also be noted that this bone:
 - only "roughly" fit the President's skull defect, according to Humes
 - filled only 2/3 of the defect (according to the JAMA article or 3/4 of the defect (according to Humes' Warren Commission testimony)
 - apparently had no identifying hair attached

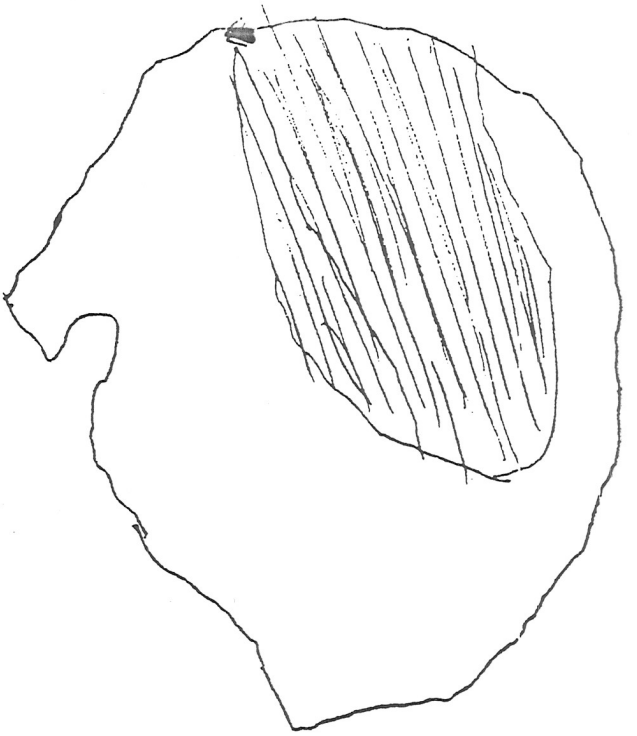
[Researcher David Lifton was the first to discover and appreciate the significance of the bone fragments in making an interpretation of the path of the bullet which struck Kennedy's head. He published his findings in Best Evidence in 1980.]

FURTHER NOTES ON THE BONE FRAGMENTS

1. As David Lifton points out, the fact that the bone fragments necessary to complete the "entrance wound" in the back of the head and the "exit wound" in the side of the head raises some questions about the photographs which depict these wounds.
 2. Humes, Boswell and Finck have all stated that until the bone fragments arrived, they did not have a complete hole in the back of the skull. These bone fragments are known to have arrived after midnight.
 3. But photographs of the back of the head, supposedly taken at the outset of the procedures, show a complete 360° hole in the cowlick area.
 4. How can this photograph be authentic, if the "hole" was only completely circumscribed by a piece of bone which came four hours after the photograph was taken?
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THE 6.5 mm METAL FRAGMENT

1. According to the autopsy, two pieces of metal were recovered from behind Kennedy's right eye in the course of the autopsy.
2. Numerous X-rays were taken as the futile search for bullets in the body continued. Apparently dissatisfied with Jerrol Custer's work, the prosecutors sent for Dr. Ebersole, Custer's boss. Ebersole says he was asked to take X-rays several times.
3. No other pieces of metal larger than metallic dust were found during this extensive and repeated X-ray search.
4. Yet the Ramsey Clark panel of pathologists convened to study the X-rays and photographs in 1968 located a piece of metal stuck in the bony table of the skull in the year, just below the cowlick "entrance wound." The piece of metal was round and conveniently measured 6.5 millimeters in diameter, just the size of a Mannlicher-Carcano round.
5. The HSCA's pathology panel confirmed the presence of this large piece of metal.
6. But how could the metal have escaped detection during the course of the autopsy? The doctors are able to find tiny fragments behind the eye, but cannot locate a 6.5 mm. piece of metal just below the very entrance wound which has drawn so much attention? To suggest that such a large piece of metal imbedded in such a prominent site was not detected is absurd.

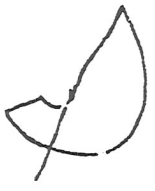


Right side of Kennedy's skull as seen when autopsy began

● Notch "that will become 'hole'"



Rear of Kennedy's skull as seen when autopsy began



CE-397

Dr. Boswell's attempt to depict how bone fragments created an entry "hole" in back of head

THE PARKLAND DOCTORS VS. DR. CHARLES CRENSHAW

1. The second JAMA article consists of interviews with Dallas doctors who were present in the Parkland emergency room when President Kennedy was brought there minutes after being shot.
2. Dr. Crenshaw has made these claims in his book, "Conspiracy of Silence" :
 - a. He was present in the Parkland emergency room and observed the President's throat and head wounds.
 - b. The throat wound was a small entrance wound, while the head wound was a large defect in the back of the President's head, in the occipital and parietal bones.
 - c. He was also present, attending the mortally wounded Lee Harvey Oswald when the accused Presidential assassin died in the emergency room on Sunday. At that time, Crenshaw took a telephone call from President Lyndon Johnson. Johnson asked the medical personnel to get a confession from Oswald before he died.
3. The Dallas doctors who were in the emergency room and were also interviewed by JAMA are: Dr. Charles Baxter, Dr. Malcolm Perry, Dr. Robert McClelland, Dr. Charles Carrico, and Dr. Marion Jenkins.
4. All except McClelland dispute Crenshaw's claims. All the others insist that what they saw in the Parkland emergency room does not in any fundamental way contradict the findings of the Bethesda autopsy and the X-rays and photographs taken to document those autopsy findings.

5. The JAMA article raises the issue of whether or not Crenshaw was even in Trauma Room 1 when Kennedy was there. Author Dennis Breo notes, "Crenshaw, who was a surgical resident in 1963, is not mentioned in the Warren Commission's 888-page summary report...."
At another point, Breo writes, "Since it is hard to prove a negative, no one can say with certainty what some suspect--that Crenshaw was not even in the trauma room; none of the four recalls ever seeing him at the scene."
6. Alas, it is possible to pinpoint Dr. Crenshaw's whereabouts on November 22. In Volume VI of the Warren Commission's Hearings and Exhibits, Crenshaw is mentioned 8 times by 5 medical personnel as being in Trauma Room 1, doing just what he said he was doing, a cutdown on one of Kennedy's legs. (One of those who mentions Crenshaw in his Warren Commission testimony is Dr. Charles Baxter, who now expresses skepticism about Crenshaw's being there.)
7. The Dallas doctors who attended President Kennedy have gone on record with their descriptions of the wounds they saw in Dallas within minutes of the time Kennedy was shot. Among the official reports by these Parkland doctors are:
 - a. CE 392--handwritten reports submitted on the afternoon of the assassination. These reports are the first accounts of JFK's wounds.

7. (continued) Warren Commission testimony--Most of the Parkland doctors testified under oath before the Commission. They were asked about the nature and location of the President's wounds.
- c. HSCA depositions--Interviews conducted with some of the Parkland doctors by the House Assassinations Committee in 1977.
8. A REVIEW OF THE TESTIMONY OF THE PARKLAND DOCTORS (INCLUDING THOSE NOW CONDEMNING CRENSHAW) REVEALS THAT THEIR OFFICIAL STATEMENTS ABOUT THE NATURE AND LOCATION OF JFK'S WOUNDS IS IN AGREEMENT WITH DR. CRENSHAW'S.
9. The President's head wound
- A. According to Dr. Crenshaw
- * located in occipitoparietal area at back of head, large and exploded outward, an exit wound
- B. According to the other Parkland doctors
- * Dr. Jenkins
 - CE 392 (hours after seeing body)--"Great laceration of the right side of the head (temporal and occipital)" (CE 392, Warren Report, p. 530.)
 - HSCA deposition-- "One segment of bone was blown out--this was a segment of occipital or temporal bone." (HSCA, 7 H 287)
 - * Dr. Carrico
 - Warren Commission testimony--"I saw a large gaping wound located in the right occipitoparietal area." (6 H 6)
 - HSCA deposition-- "...fairly large wound in the right side of the head, in the parietal, occipital area....That would be above and posterior to the ear." (HSCA 7 H 278)
 - * Dr. Malcolm Perry
 - CE 392--"a large wound of the right posterior cranium." (WR, p. 521)
 - Warren Commission testimony--"...a large avulsive wound of the right occipitoparietal area." (6 H 11)
 - HSCA deposition-- "...the parietal occipital head wound was largely avulsive (HSCA 7 H 302)
 - * Dr. Charles Baxter
 - CE 392--"the rt temporal and occipital bones were missing and the grain was lying on the table." (WR, p. 523)

* Dr. Robert McClelland

- WC testimony--"I noted that the right posterior portion of the skull had been extremely blasted... some of the occipital bone was fractured in its lateral half." (6 H 33)

* Dr. Kemp Clark

- CE 392--"Two external wounds...the other in the occipital area of the skull...a large wound of the right occipitoparietal area." (WR, p. 517)
- WC testimony--"I examined the wound in the back of the President's head." (6 H 20)
"...presence of the much larger wound in the right occipital region" (6 H 29)

* Dr. Paul Peters

- WC testimony--"I noted that there was a large defect in the occiput." (6 H 71)

* Dr. Ronald Jones

- WC testimony--"There was a large defect in the back of the head." (6 H 53)

* Dr. Gene Akin

- WC testimony--"In the back the right occipitoparietal part of the skull was shattered." (6 H 65)

- C. **THUS DR. CRENSHAW AND ALL THE OTHER PARKLAND DOCTORS HAVE CONSISTENTLY PLACED A LARGE WOUND IN THE BACK OF KENNEDY'S HEAD. DR. CRENSHAW AND ALL THE OTHER DOCTORS MENTION THE OCCIPITAL BONE AS BEING BLASTED.**
- D. **PHOTOGRAPHS ALLEGEDLY TAKEN BEFORE THE AUTOPSY AT BETHESDA SHOW THE OCCIPITAL AREA IN THE BACK OF THE HEAD TOTALLY INTACT.**
- E. **THUS, CRENSHAW AND ALL THE OTHER PARKLAND DOCTORS DISAGREE FUNDAMENTALLY WITH THE AUTOPSY PHOTOS SHOWING THE BACK OF THE HEAD.**

10. Damage to the cerebellum

- A. According to the autopsy photographs there is no damage to the cerebellum.
- B. According to Dr. Crenshaw
Dr. Crenshaw says the cerebellum was hanging out of the rear head wound, with strands of brain tissue extending into the brain itself.
- C. According to the other Parkland doctors
 - * Dr. Marion Jenkins
 - CE 392--"herniation and laceration of great areas of

C. (continued)

of the brain, even to the extent that the cerebellum had protruded from the wound." (WR, p. 530)

- WC testimony--"Part of the brain was herniated; I really think part of the cerebellum...was hanging out from the wound." (6 H 48)
- HSCA deposition--"He [Jenkins] noted that a portion of the cerebellum was hanging out from a hole in the right-rear of the head." (HSCA, 7 H 287)
- * Dr. Charles Carrico
 - WC testimony--"...skull was fragmented and bleeding cerebral and cerebellar tissue." (6 H 3)
 - HSCA deposition--"One could see blood and brains, both cerebrum and cerebellum fragments in that wound." (HSCA 7 H 268)
- * Dr. Malcolm Perry
 - HSCA deposition--"There was visible brain tissue in the macard and some cerebellum was seen." (HSCA 7 H 302)
- * Dr. Robert McClelland
 - WC testimony-- "...brain tissue, posterior cerebral tissue and some of the cerebellar tissue had been blasted out." (6 H 33)
- * Dr. Charles Baxter
 - WC testimony-- "...the cerebellum was present--a large quantity of the brain was present on the cart." (6 H 41)
- * Dr. Kemp Clark
 - WC testimony-- "...cerebral and cerebellar tissue being damaged and exposed." (6 H 20)
"...the loss of cerebellar tissue..." (6 H 26)

- D. IT IS CLEAR THAT DR. CRENSHAW AND SEVERAL OTHER DALLAS DOCTORS SAW THE CEREBELLUM DAMAGED AND PROTRUDING FROM THE OCCIPITAL HEAD WOUND.
- E. AGAIN, DR. CRENSHAW'S OBSERVATIONS ARE CONSISTENT WITH THOSE OF THE OTHERS IN THE EMERGENCY ROOM.
- F. PHOTOGRAPHS OF THE BRAIN SHOW THE CEREBELLUM TO BE COMPLETELY INTACT. THIS IS IN FUNDAMENTAL DISAGREEMENT WITH THE DALLAS DOCTORS, INCLUDING CRENSHAW.

11. The throat wound

- A. The autopsy doctors at first failed to appreciate that there was a bullet wound in Kennedy's throat. The tracheostomy performed by Dr. Perry had changed the nature of the defect. It was not until the morning after the autopsy that Dr. Humes, in telephone

11. (continued)

conversation with Dr. Perry, learned of the throat wound. At this point, Dr. Humes assumed the throat wound to be an exit point for a bullet which had struck Kennedy in the upper back. There was no physical verification for this, since no dissection of the neck had occurred during the autopsy and the body was lying in state in the White House when Dr. Humes received his information from Dr. Perry.

B. According to Dr. Crenshaw

Dr. Crenshaw says the throat wound was an entrance wound, smooth and small, about the size of the end of the finger.

C. According to the Parkland doctors* Dr. Paul Peters

-WC testimony--"We saw the wound of entry in the throat and noted the large occipital wound."
(6 H 71)

Dr. Malcolm Perry

-press conference statement. Dr. Malcolm Perry participated in a press conference less than two hours after he performed a tracheostomy on Kennedy's throat at Parkland. Dr. Perry made his tracheotomy incision through a bullet wound.

At the press conference, Dr. Perry 3 times identified the throat wound as an entrance wound.

The transcript of this press conference is kept in the LBJ Library in Austin, Texas. It is White House transcript 1327-C. According to this transcript, these exchanges took place:

Q. Where was the entrance wound?

PERRY. There was an entrance wound in the neck.

Q. Which way was the bullet coming on the neck wound? At him?

PERRY. It appeared to be coming at him.

(later)

Q. Doctor, describe the entrance wound. You think from the front in the throat?

PERRY. The wound appeared to be an entrance wound in the front of the throat; yes, that is correct."

D. THE BETHESDA PATHOLOGISTS, WITHOUT EXAMINING THE THROAT WOUND, CONCLUDED THAT IT WAS A WOUND OF EXIT.

- E. DR. CRENSHAW CALLS IT AN ENTRANCE WOUND.
 F. DR. PERRY, WITHIN AN HOUR OF SEEING IT, CALLED THE THROAT WOUND AN ENTRANCE WOUND ON NOVEMBER 22, 1963.

SUMMARY

1. The Parkland doctors described a large wound in the back of the head, damage to the cerebellum and an entrance wound in the throat. ALL OF THESE ARE CONTRADICTIONARY TO THE FINDINGS OF THE BETHESDA AUTOPSY.
2. The other Parkland doctors' descriptions of the head wound, cerebellum, and throat wound are consistent with those of Dr. Crenshaw, whom they now attack for insisting that Kennedy was shot from the front.
3. What about the allegation that President Lyndon Johnson called the Parkland emergency room while Oswald was being treated there at mid-day on Sunday?
 - * Dr. Charles Baxter has said, "Did that happen? Heavens no...imagine that, the President of the United States personally calls for Charles Crenshaw." Crenshaw was then told to try to get the accused to confess before he expired.
 - * Crenshaw never claimed that LBJ called for him. He asserted in his book that Johnson called the emergency room and a nurse tapped him on the shoulder as one of the doctors in the room.
 - * Support for Crenshaw's claim has come from two sources:
 - a. ABC-TV examined Johnson's log and found that he conferred with Attorney General Robert Kennedy just after Oswald was shot. Historian William Manchester writes that Johnson said, "We've got to get involved; we've got to do something."
 - b. Dallas brain surgeon Philip Williams, who was also present in the emergency room while Oswald was there, says there was a White House phone call, whether from the President or an aide. Williams says he has told people of the call for years.